



2026

COMMUNITY HEALTH NEEDS ASSESSMENT

Circle, Montana

*Assessment conducted by **McCone County Health Center** in
cooperation with the **Montana Office of Rural Health***



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INTRODUCTION

Introduction

McCone County Health Center (MCHC) in Circle, Montana is a licensed 25-bed Critical Access Hospital (CAH) and rural health clinic. The CAH's 25-beds may be used interchangeably for acute or swing bed services. MCHC utilizes approximately 21 beds for long-term care residents. Besides primary care services provided through the McCone County Rural Health Clinic, other services include the following: inpatient, outpatient, emergency, acute, skilled nursing facility, nursing facility (long-term care), observation, in-patient pharmacy, x-ray, laboratory, physical therapy and telehealth.



McCone County is the owner of the facilities housing McCone County Health Center, which include McCone County Rural Health Clinic and the surrounding grounds. McCone County contracts management and operation of such facilities to MCHC. MCHC has a service area of just over 2,600 square miles and offers medical services to the McCone County population of approximately 1,701 people.

McCone County Health Center's primary service area includes the communities of Circle, Brockway, Vida and Richey; and residents living in Dawson County along US 200. McCone County has a low population density and is considered a frontier (six or less people per square mile) by the US Department of Health and Human Services. For further demographic, socioeconomic and other related county and state data, please see Appendix C to review the Secondary Data Analysis.



Mission: McCone County Health Center is dedicated to providing our residents and patients with optimal and achievable health care services, implementing programs and services that will provide for the overall health and well-being of its service area, and centralize health care services.

McCone County Health Center participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. Community involvement in steering committee meetings and key informant interviews enhance community engagement in the assessment process.

In January and February 2026 MCHC's was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included as the end of this report (Appendix E). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for every question asked. Please note we are able to compare some of the 2026

survey data with data from previous surveys conducted in partnership with the Montana Office of Rural Health in 2023 and 2020. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

Health Assessment Process

A steering committee was convened to assist McCone County Health Center in conducting CHSD. A diverse group of community members representing various organizations and populations within the community (ex. public health, elderly, young families, uninsured) came together in December 2025. For a list of all steering committee members and their affiliations, see Appendix A. The Steering Committee met twice during the CHSD process; first to discuss health concerns in the community and offer their perspective in designing the survey instrument, and again to review results of the CHNA and to assist in the prioritization of health needs.



Survey Methodology

Survey Instrument

In January 2026 surveys were mailed out to the residents in the MCHC service area. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University's HELPS Lab web portal. The survey was based on a design that has been used extensively in the states of Washington, Wyoming, Alaska, Montana, and Idaho. The survey was designed to provide each facility with information from local residents regarding:

- Demographics of respondents
- Hospitals, primary care providers, and specialists used, plus reasons for selection
- Local healthcare provider usage
- Services preferred locally
- Perception and satisfaction of local healthcare

Sampling

McCone County Health Center provided an aggregated list of outpatient and inpatient admissions and information regarding service area zip codes. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 644 residents was then selected with the assistance of MSU Social Data. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. Note: although the survey samples were proportionately selected, actual surveys returned

from each population area varied, which may result in slightly less proportional results. See table on the following page for the survey distribution.

Zip Code	Population ¹	Community Name	Total Distribution	# Male	# Female
59215	1104	Circle	322	172	150
59259	391	Richey	129	63	66
59214	14	Brockway	57	29	28
59274	246	Vida	66	31	35
59201	4998	Wolf Point	10	5	5
59339	157	Lindsay	50	26	24
59330	8244	Glendive	10	5	5
Total			644	331	313

¹ US Census Bureau - American Community Survey (2023)

Key informant interviews were conducted to identify important local healthcare issues, how to improve the health of the community, and gaps in health services. It was intended that this research would help determine the awareness of local programs and services, as well as the level of satisfaction with local services, providers, and facilities.

Information Gaps – Data

It is a difficult task to define the health of rural and frontier communities in Montana due to the large geographic size, economic and environmental diversity, and low population density. Obtaining reliable, localized health status indicators for rural communities continues to be a challenge in Montana.

There are many standard health indices used to rank and monitor health in an urban setting that do not translate as accurately in rural and frontier areas. In the absence of sufficient health indices for rural and frontier communities in Montana, utilizing what is available is done with an understanding of access to care in rural and frontier Montana communities and barriers of disease surveillance in this setting.

The low population density of rural and frontier communities often requires regional reporting of many major health indices, including chronic disease burden and behavior health indices. The Montana BRFSS (Behavioral Risk Factor Surveillance System), through a cooperative agreement with the Center for Disease Control and Prevention (CDC), is used to identify regional trends in health-related behaviors. The fact that many health indices for rural and frontier counties are reported regionally makes it impossible to set the target population aside from the five more-developed Montana counties.

Limitations in Survey and Interview Methodology

A common approach to survey research is the mailed survey. However, this approach is not without limitations. There is always the concern of non-response as it may affect the representativeness of the sample. Thus, a mixture of different data collection methodologies is recommended.

Conducting key informant interviews in addition to the random sample survey allows for a more robust sample, and ultimately, these efforts help to increase the community response rate. Partnering with local community organizations such as public health, community health centers, and senior centers, just to name a few, assists in reaching segments of the population that might not otherwise respond to a survey.

Interview data can offer invaluable insight into the perception of a community or group of individuals. It is coded and grouped into common themes. To better understand these themes, please review the detailed notes in Appendix I. MORH staff facilitated focus groups for MCHC to ensure impartiality. However, given the small size of the community, participants may still be hesitant to express their opinions freely. Personal identifiers are not included in the notes.

Survey Implementation

In January 2026, a survey, cover letter with the MCHC CEO's signature, and a postage paid envelope were mailed to 644 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that McCone County Health Center would be conducting a community health needs assessment survey throughout the region in cooperation with the Montana Office of Rural Health.

Of the 644 surveys that were sent, 24 surveys were returned undeliverable. 135 surveys were returned for a 21.8% response rate. From this point on, the total number of surveys will be out of 620. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 8.1%.

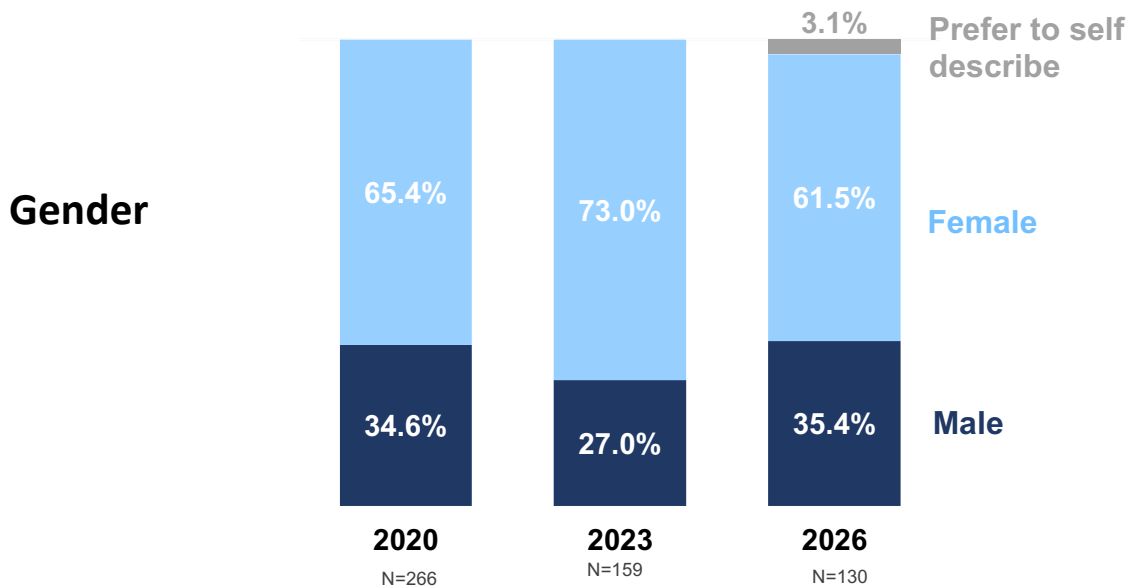


Survey Respondent Demographics

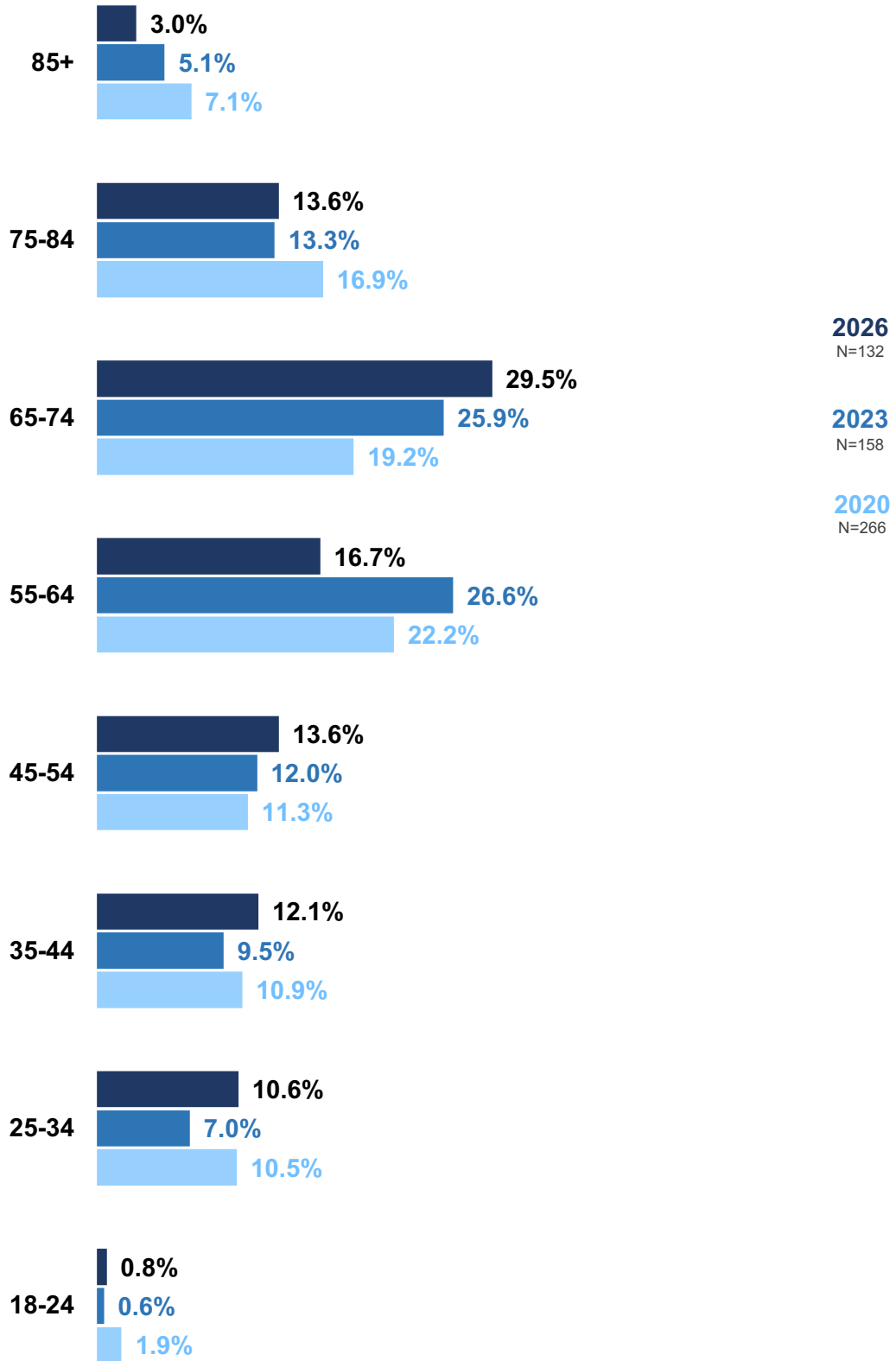
A total of 644 surveys were distributed throughout the MCHC service area. 135 surveys were completed for a 21.8% response rate. The following table and graphs indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

Place of Residence	2020 % (n)	2023 % (n)	2026 % (n)
Number of respondents	268	159	133
59215 Circle	70.1% (188)	71.1% (113)	53.4% (71)
59259 Richey	12.7% (34)	15.1% (24)	15.0% (20)
59274 Vida	5.6% (15)	3.8% (6)	14.3% (19)
59339 Lindsay	2.2% (6)	2.5% (4)	9.8% (13)
59214 Brockway	6.0% (16)	4.4% (7)	6.0% (8)
59330 Glendive			0.8% (1)
59201 Wolf Point	0.0% (0)	1.9% (3)	0.0% (0)
Other	3.4% (9)	0.6% (1)	0.8% (1)

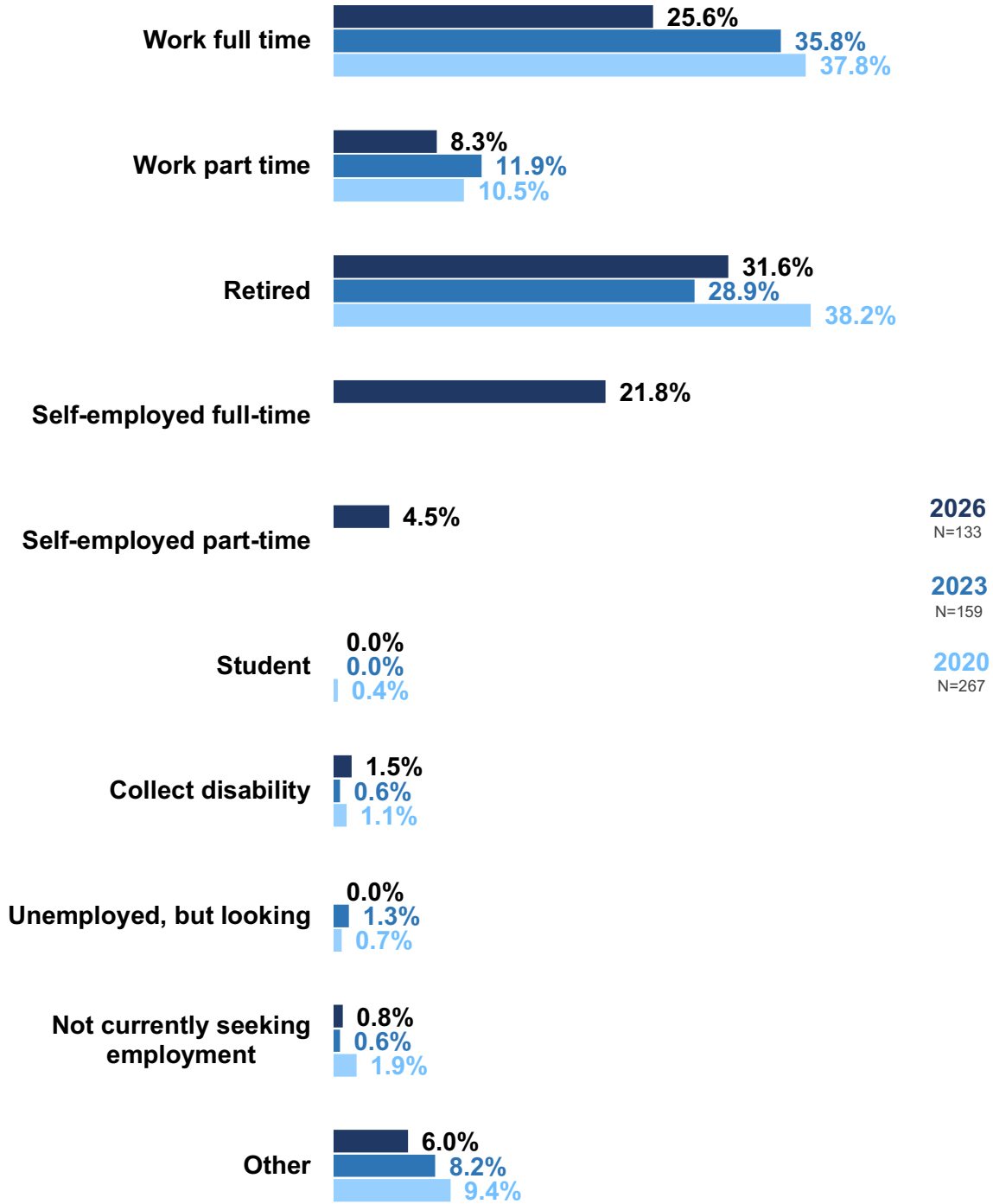
Grayed out cells indicate the question was not asked that year. Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, may not necessarily add up to the total listed for number of respondents.



Age



Employment Status



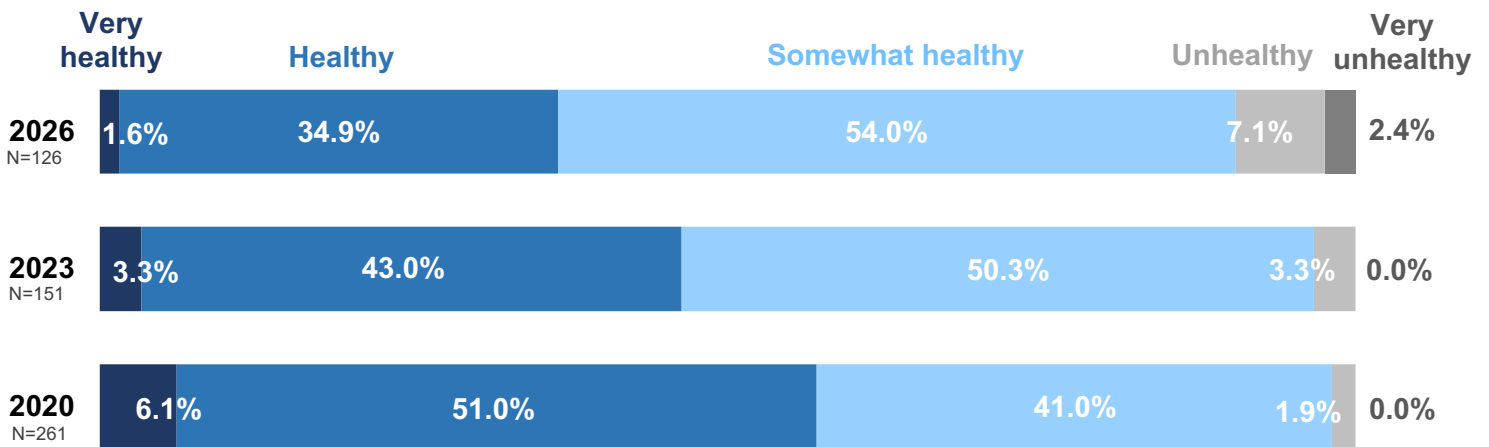


SURVEY RESULTS

Survey Results

Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. 54.0% of respondents (n=68) rated their community as “Somewhat healthy,” and 34.9% (n=44) felt their community was “Healthy.” 7.1% of respondents (n=9) indicated they felt their community was “Unhealthy,” 2.4% (n=3) said “Very unhealthy,” and 1.6% (n=2) said “Very healthy.”



Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Cancer” at 63.48% (n=85), which has experienced a continuous rise over the last three assessments. “Alcohol/substance use” was also a top concern at 32.1% (n=43), followed by “Overweight/obesity” at 26.1% (n=35).

Health Concern	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	272	157	134	
Cancer	41.2% (112)	54.8% (86)	63.4% (85)	■
Alcohol/substance use	26.8% (73)		32.1% (43)	□
Overweight/obesity	25.7% (70)	22.3% (35)	26.1% (35)	□
Diabetes	21.3% (58)	18.5% (29)	20.1% (27)	□
Heart disease	24.6% (67)	19.7% (31)	17.9% (24)	□
Work/economic stress	14.3% (39)	9.6% (15)	16.4% (22)	□
Lack of dental care	14.3% (39)	14.0% (22)	14.9% (20)	□
Lack of exercise	9.2% (25)	8.9% (14)	14.2% (19)	□
Alzheimer’s/dementia	7.4% (20)	17.2% (27)	9.7% (13)	■
Lack of access to healthcare	15.4% (42)	17.8% (28)	9.0% (12)	□
Allergy-related issues			6.7% (9)	□
Mental health issues (depression, anxiety, PTSD, etc.)			6.7% (9)	□
Stroke	7.0% (19)	7.0% (11)	6.7% (9)	□
Tobacco use (cigarettes/cigars, vaping, smokeless)	13.2% (36)	12.1% (19)	6.7% (9)	□
Respiratory issues/illness	6.6% (18)	4.5% (7)	6.0% (8)	□
Social isolation/loneliness	9.6% (26)	13.4% (21)	6.0% (8)	□
Work related accidents/injuries	4.0% (11)	3.2% (5)	4.5% (6)	□
Motor vehicle accidents	3.3% (9)	1.3% (2)	3.7% (5)	□
Child abuse/neglect	0.0% (0)	0.6% (1)	1.5% (2)	□
Recreation related accidents/injuries	1.8% (5)	1.9% (3)	0.7% (1)	□
Suicide	1.5% (4)	1.3% (2)	0.7% (1)	□
Trauma/Adverse Childhood Experiences (ACES)			0.7% (1)	□
Domestic violence	0.4% (1)	0.0% (0)	0.0% (0)	□
Hunger	0.0% (0)	0.0% (0)	0.0% (0)	□

Other	3.7% (10)	1.3% (2)	3.7% (5)	<input type="checkbox"/>
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A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Lack of eye care,” “Pollution”

(View all comments in Appendix G)

Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Fifty point six percent of respondents (n=80) indicated that “Access to healthcare services” is important for a healthy community, followed by “Good jobs and a healthy economy” and “Strong family life” at 35.4% (n=56, each).

Components of a Healthy Community	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	272	158	132	
Access to healthcare services	57.7% (157)	50.6% (80)	54.5% (72)	<input type="checkbox"/>
Healthy behaviors and lifestyles	29.0% (79)	25.9% (41)	35.6% (47)	<input type="checkbox"/>
Good jobs and a healthy economy	44.1% (120)	35.4% (56)	33.3% (44)	<input type="checkbox"/>
Strong family life	29.8% (81)	35.4% (56)	31.1% (41)	<input type="checkbox"/>
Access to healthy foods	17.3% (47)	17.7% (28)	27.3% (36)	<input checked="" type="checkbox"/>
Religious or spiritual values	30.5% (83)	27.8% (44)	23.5% (31)	<input type="checkbox"/>
Good schools	22.1% (60)	28.5% (45)	22.0% (29)	<input type="checkbox"/>
Affordable housing	7.0% (19)	11.4% (18)	11.4% (15)	<input type="checkbox"/>
Opportunities for physical activity	5.1% (14)	6.3% (10)	11.4% (15)	<input type="checkbox"/>
Community involvement	8.5% (23)	10.8% (17)	9.1% (12)	<input type="checkbox"/>
Access to childcare/ after school programs	7.4% (20)	11.4% (18)	8.3% (11)	<input type="checkbox"/>
Clean environment	5.9% (16)	8.2% (13)	6.8% (9)	<input type="checkbox"/>
Low crime/safe neighborhoods	10.3% (28)	12.0% (19)	5.3% (7)	<input type="checkbox"/>
Low death and disease rates	2.6% (7)	3.8% (6)	3.8% (5)	<input type="checkbox"/>
Tolerance for diversity	1.8% (5)	3.2% (5)	3.0% (4)	<input type="checkbox"/>

Transportation services	4.0% (11)	1.9% (3)	2.3% (3)	<input type="checkbox"/>
Parks and recreation	0.4% (1)	0.0% (0)	1.5% (2)	<input type="checkbox"/>
Arts and cultural events	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Low level of domestic violence	1.1% (3)	0.6% (1)	0.0% (0)	<input type="checkbox"/>
Other*	2.2% (6)	1.9% (3)	2.3% (3)	<input type="checkbox"/>

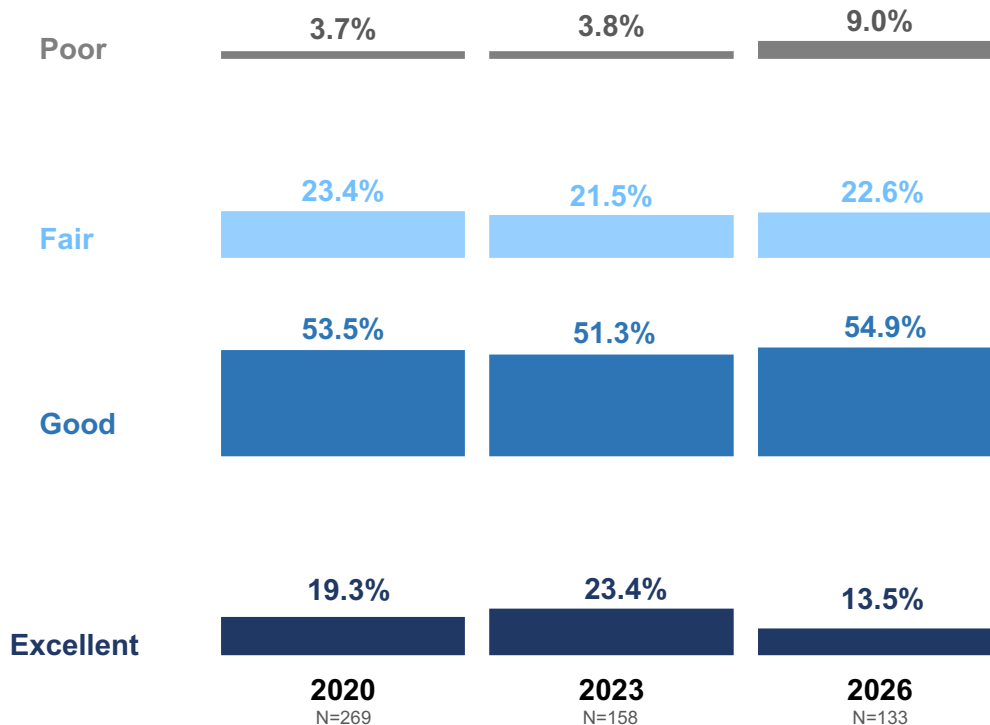
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=1) who selected over the allotted amount were moved to "Other."

"Other" comments included: "Chiropractic"

(View all comments in Appendix G)

Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through McCone County Health Center. 54.9% of respondents (n=73) rated their knowledge of health services as "Good," 22.6% (n=30) said "Fair," 13.5% of respondents said "Excellent," and 9.0% (n=12) said "Poor."



How Respondents Learn of Health Services in the Community (Question 5)

When asked how survey respondents learn about health services available in the community, the most frequently indicated method was “Word of mouth/reputation” at 56.8% (n=75), followed by “Friends/family” at 52.3% (n=69) and then “Social media/Facebook” at 44.7% (n=59).

How Respondents Learn about Community Health Services	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	272	158	132	
Word of mouth/reputation	52.6% (143)	61.4% (97)	56.8% (75)	<input type="checkbox"/>
Friends/family	52.6% (143)	57.0% (90)	52.3% (69)	<input type="checkbox"/>
Social media/Facebook	37.9% (103)	27.8% (44)	44.7% (59)	<input checked="" type="checkbox"/>
Healthcare provider	46.0% (125)	39.9% (63)	36.4% (48)	<input type="checkbox"/>
Circle Banner	56.6% (154)	46.2% (73)	25.0% (33)	<input checked="" type="checkbox"/>
Public health	23.2% (63)	20.3% (32)	22.0% (29)	<input type="checkbox"/>
Billboards/posters	8.5% (23)	8.9% (14)	15.2% (20)	<input type="checkbox"/>
Website/internet	8.1% (22)	3.2% (5)	12.1% (16)	<input checked="" type="checkbox"/>
Senior center	21.3% (58)	13.9% (22)	9.1% (12)	<input checked="" type="checkbox"/>
Mailings/newsletter	12.9% (35)	7.0% (11)	8.3% (11)	<input type="checkbox"/>
Newspaper	15.1% (41)	11.4% (18)	8.3% (11)	<input type="checkbox"/>
Radio	4.8% (13)	2.5% (4)	3.0% (4)	<input type="checkbox"/>
Presentations	2.2% (6)	1.3% (2)	1.5% (2)	<input type="checkbox"/>
Other	2.6% (7)	3.8% (6)	4.5% (6)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate all methods of receiving information, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Work,” “Employer mandated drug testing”

(View all comments in Appendix G)

View a cross tabulation of how respondents learn with how they rate their knowledge on p. 80

Utilized Community Health Resources (Question 6)

Respondents were asked which community health resources other than the hospital or hospital clinic they had used in the last three years. “Eye doctor” was the most frequently utilized community health resource cited by respondents at 43.5% (n=47). “Chiropractor” was utilized by 41.7% (n=45) of respondents followed by “Massage therapy” at 26.9% (n=29).

Use of Community Health Resources	2020 % (n)	2023 % (n)	2026 % (n)
Number of respondents	272	132	108
Eye doctor	48.5% (132)	30.3% (40)	43.5% (47)
Chiropractor	36.4% (99)	47.7% (63)	41.7% (45)
Massage Therapy	21.3% (58)	14.4% (19)	26.9% (29)
Public health	33.8% (92)	36.4% (48)	20.4% (22)
Senior center	23.9% (65)	26.5% (35)	16.7% (18)
Dentist (Pediatric school program)	47.4% (129)	22.7% (30)	15.7% (17)
Fitness center at The Bin		6.8% (9)	12.0% (13)
Mental Health	3.3% (9)	3.0% (4)	4.6% (5)
Conroy Care (Assisted living)		1.5% (2)	3.7% (4)
Homestead (Home health services)		5.3% (7)	3.7% (4)
Meals on Wheels	7.4% (20)	5.3% (7)	2.8% (3)
Other	7.7% (21)	6.1% (8)	6.5% (7)

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to select all other community health resources used, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “ER,” “Dentist and surgery”

(View all comments in Appendix G)

Improve Community’s Access to Healthcare (Question 7)

Respondents were asked to indicate what they felt would improve their community’s access to healthcare. “More visiting specialists” was the top answer at 52.5% (n=63). 31.7% of respondents (n=38) indicated that an “More information about available services” would improve access and 30.0% (n=36) said “Telemedicine” would help.

More visiting specialists would make the greatest improvement to healthcare access.

What Would Improve Community Access to Healthcare	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	272	145	120	
More visiting specialists	44.5% (121)	49.0% (71)	52.5% (63)	<input type="checkbox"/>
More information about available services	22.8% (62)	33.1% (48)	31.7% (38)	<input checked="" type="checkbox"/>
Telemedicine	24.3% (66)	20.7% (30)	30.0% (36)	<input type="checkbox"/>
More primary care providers	41.5% (113)	55.9% (81)	26.7% (32)	<input checked="" type="checkbox"/>
Improved quality of care	11.8% (32)	22.8% (33)	25.8% (31)	<input checked="" type="checkbox"/>
Payment assistance programs (healthcare expenses)	11.4% (31)	9.0% (13)	19.2% (23)	<input checked="" type="checkbox"/>
Expanded hours for outpatient services (e.g., x-ray, labs, physical therapy)	13.6% (37)	18.6% (27)	17.5% (21)	<input type="checkbox"/>
Expanded mental health services		16.6% (24)	16.7% (20)	<input type="checkbox"/>
Transportation assistance	10.7% (29)	13.8% (20)	15.0% (18)	<input type="checkbox"/>
Greater health education services	9.6% (26)	9.0% (13)	6.7% (8)	<input type="checkbox"/>
Interpreter services/cultural sensitivity			0.0% (0)	<input type="checkbox"/>
Other	7.7% (21)	9.7% (14)	8.3% (10)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to select any items that would improve community access to healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Willingness to acknowledge mental health issues,” “Not having to travel for every test other than xray. Like CT scans , ultrasounds etc”

(View all comments in Appendix G)

Interest in Educational Classes/Programs (Question 8)

Respondents were asked which topics they would be most interested in learning more about. The most frequently selected topic was “Weight loss” at 34.5% (n=39), followed by “Women’s health” at 33.6% (n=38) and “Health and wellness” at 31.9% (n=36).

Interest in Classes or Programs	2020 % (n)	2023 % (n)	2026 % (n)
Number of respondents	272	124	113
Weight loss	30.9% (84)	37.9% (47)	34.5% (39)
Women’s health	27.6% (75)	32.3% (40)	33.6% (38)
Health and wellness	27.2% (74)	32.3% (40)	31.9% (36)
First aid/CPR	23.2% (63)	25.0% (31)	29.2% (33)
Fitness	27.2% (74)	27.4% (34)	28.3% (32)
Living will	21.7% (59)	24.2% (30)	24.8% (28)
Nutrition	20.2% (55)	24.2% (30)	22.1% (25)
Diabetes/diabetes prevention	13.2% (36)	15.3% (19)	18.6% (21)
Alzheimer’s/dementia	11.4% (31)	13.7% (17)	15.9% (18)
Cancer	12.1% (33)	15.3% (19)	15.9% (18)
Mental health	11.8% (32)	21.8% (27)	14.2% (16)
Caregiver support	5.9% (16)	13.7% (17)	13.3% (15)
Men’s health	12.9% (35)	12.9% (16)	12.4% (14)
Grief counseling	5.5% (15)	8.9% (11)	8.8% (10)
Heart disease	11.0% (30)	9.7% (12)	8.8% (10)
Support groups	6.6% (18)	7.3% (9)	6.2% (7)
Smoking/tobacco cessation	2.9% (8)	4.0% (5)	5.3% (6)
Parenting	7.4% (20)	3.2% (4)	4.4% (5)
Lactation/breastfeeding support	1.5% (4)	1.6% (2)	3.5% (4)
Prenatal	2.9% (8)	0.0% (0)	2.7% (3)
Alcohol/substance use	4.0% (11)	0.8% (1)	0.9% (1)
Other	1.8% (5)	2.4% (3)	1.8% (2)

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents could select any of the preventative services listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Chiropractor,” “Natural supplement health”

(View all comments in Appendix G)

Desired Local Health Services (Question 9)

Respondents were asked to indicate which additional services they would utilize if available locally. Respondents indicated the most interest in “Vision services (eye doctor)” at 68.6% (n=81). 65.3% (n=77) of respondents were interested in “Dental services,” followed by “Visiting dermatologist” at 52.5% (n=62).

Desired Local Services	2020 % (n)	2023 % (n)	2026 % (n)
Number of respondents	272	149	118
Vision services (eye doctor)	59.9% (163)	59.1% (88)	68.6% (81)
Dental services	62.9% (171)	59.7% (89)	65.3% (77)
Visiting dermatologist		48.3% (72)	52.5% (62)
Mental health therapists (pediatrics and adults)		15.4% (23)	17.8% (21)
Visiting orthopedist		20.1% (30)	16.9% (20)
Visiting OB/GYN		18.8% (28)	16.1% (19)
Visiting pediatrician		9.4% (14)	9.3% (11)
Other	3.3% (9)	4.0% (6)	3.4% (4)

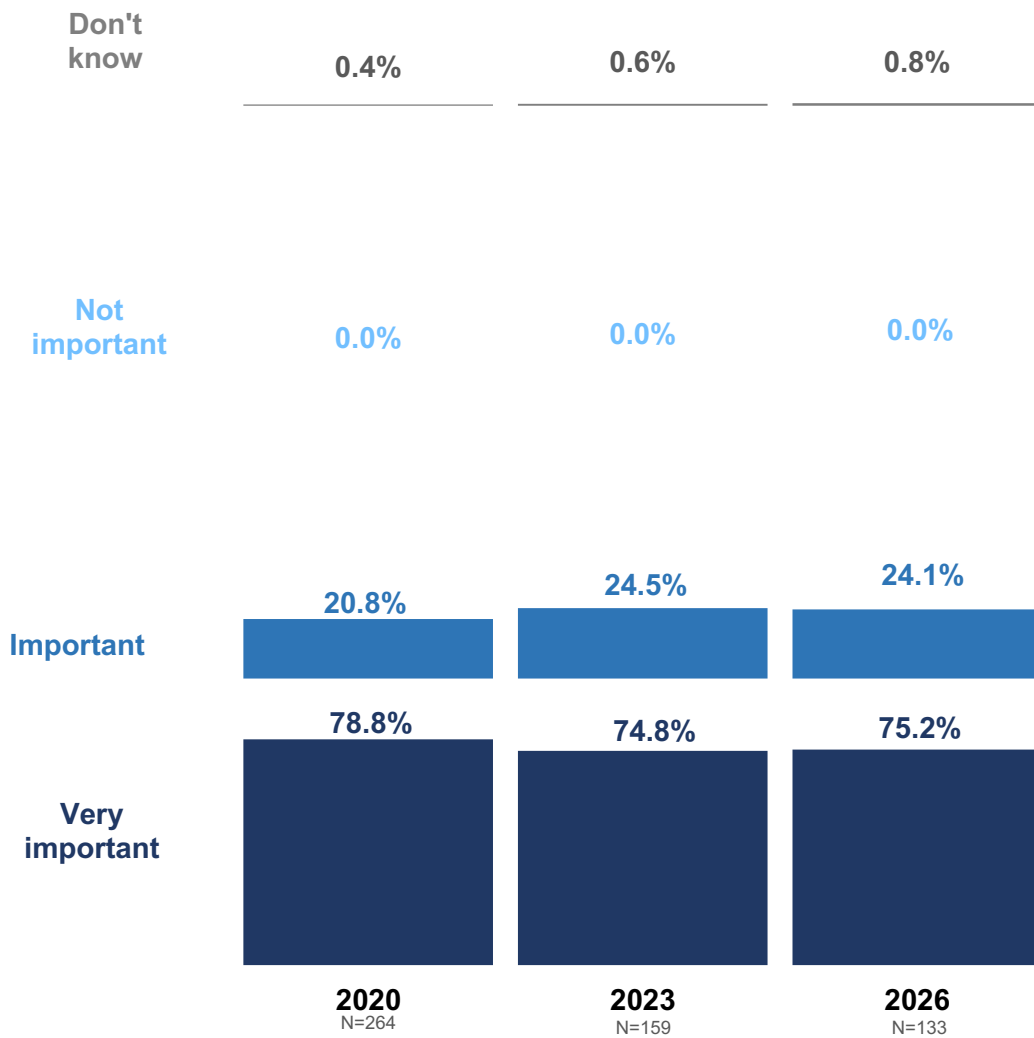
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick all desired local services that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Chiropractor,” “Pharmacy,” “Specialists”

(View all comments in Appendix G)

Economic Importance of Healthcare (Question 10)

The majority of respondents (75.2%, n=100) indicated that local healthcare providers and services (i.e. hospitals, clinics, nursing homes, assisted living, etc.) are “Very important” to the economic well-being of the area. 24.1% of respondents (n=32) indicated they are “Important,” and 0.8% (n=1) “Don’t know.” No respondents felt they are “Not important” to the economic well-being of the area.



Utilization of Preventive Services (Question 11)

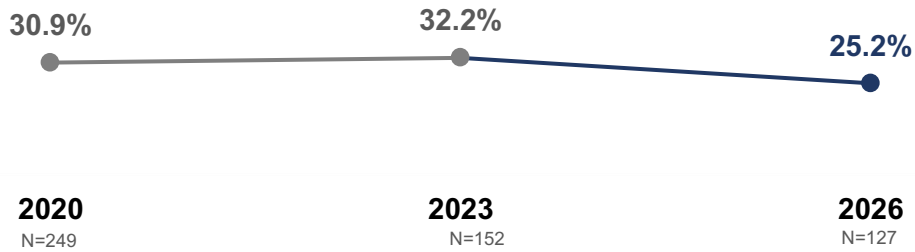
Respondents were asked if they had utilized any of the preventive services listed in the past year. “Blood pressure check” and “Dental check” were both selected by 60.0% of respondents (n=78 each). 56.2% of respondents (n=73) indicated they received a “Vision check,” and 53.1% of respondents (n=69) had a “Health checkup.”

Use of Preventive Services	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	272	154	130	
Blood pressure check	63.2% (172)	63.6% (98)	60.0% (78)	<input type="checkbox"/>
Dental check	54.4% (148)	51.3% (79)	60.0% (78)	<input type="checkbox"/>
Vision check	56.3% (153)	54.5% (84)	56.2% (73)	<input type="checkbox"/>
Health checkup	51.1% (139)	53.2% (82)	53.1% (69)	<input type="checkbox"/>
Health fair (labs)	48.5% (132)	49.4% (76)	43.8% (57)	<input type="checkbox"/>
Chiropractor		29.0% (45)	39.2% (51)	<input type="checkbox"/>
Cholesterol check	40.8% (111)	43.5% (67)	33.8% (44)	<input type="checkbox"/>
Mammography	29.8% (81)	37.7% (58)	33.8% (44)	<input type="checkbox"/>
Flu shot/immunizations	59.9% (163)	48.7% (75)	33.1% (43)	<input checked="" type="checkbox"/>
Skin check	17.6% (48)	22.7% (35)	24.6% (32)	<input type="checkbox"/>
Prostate (PSA)	25.0% (68)	26.6% (41)	22.3% (29)	<input type="checkbox"/>
Weight/BMI check			14.6% (19)	<input type="checkbox"/>
Children’s checkup/Well baby	13.2% (36)	12.3% (19)	13.8% (18)	<input type="checkbox"/>
Pap test	20.6% (56)	19.5% (30)	13.8% (18)	<input type="checkbox"/>
Colonoscopy	17.6% (48)	13.6% (21)	13.1% (17)	<input type="checkbox"/>
Hearing check	14.7% (40)	14.3% (22)	12.3% (16)	<input type="checkbox"/>
Mental health therapist		7.1% (11)	6.2% (8)	<input type="checkbox"/>
Allergy test		6.5% (10)	5.4% (7)	<input type="checkbox"/>
None	2.6% (7)	4.5% (7)	3.1% (4)	<input type="checkbox"/>
Other	1.8% (5)	5.2% (8)	3.8% (5)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents could select any of the preventive services listed, so percentages do not equal 100%. Grayed out cells indicate the question wasn’t asked that year. “Other” comments included: “Cologuard,” “Oncology,” “Thermology”

Delay of Services (Question 12)

25.2% of respondents (n=32) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them. 74.8% of respondents (n=95) felt they were able to get the healthcare services they needed without delay.



View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 81

Reason for Not Receiving/Delaying Needed Services (Question 13)

Among survey respondents who indicated they were unable to receive or had to delay services (n=32), 30 indicated reasons why. The top three reasons for not receiving or delaying needed services were “Could not get an appointment with my provider of choice” (26.7%, n=8) and “Could not get an appointment” and “Too long to wait for an appointment” (both 23.3%, n=7).

Reasons for Delay in Receiving Needed Healthcare	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	77	49	30	
Could not get an appointment with provider of choice	31.2% (24)	34.7% (17)	26.7% (8)	<input type="checkbox"/>
Could not get an appointment	32.5% (25)	18.4% (9)	23.3% (7)	<input type="checkbox"/>
Too long to wait for an appointment	28.6% (22)	28.6% (14)	23.3% (7)	<input type="checkbox"/>
It cost too much	16.9% (13)	14.3% (7)	20.0% (6)	<input type="checkbox"/>
It was too far to go	9.1% (7)	12.2% (6)	16.7% (5)	<input type="checkbox"/>
My insurance didn't cover it	10.4% (8)	10.2% (5)	13.3% (4)	<input type="checkbox"/>
Unsure if services were available	3.9% (3)	2.0% (1)	13.3% (4)	<input type="checkbox"/>
Want to see a doctor (MD/DO)	6.5% (5)	8.2% (4)	13.3% (4)	<input type="checkbox"/>
Could not get off work	9.1% (7)	4.1% (2)	10.0% (3)	<input type="checkbox"/>
Didn't know where to go	5.2% (4)	16.3% (8)	10.0% (3)	<input type="checkbox"/>
Office wasn't open when I could go	10.4% (8)	14.3% (7)	10.0% (3)	<input type="checkbox"/>
Privacy/confidentiality			10.0% (3)	<input type="checkbox"/>
No insurance	6.5% (5)	6.1% (3)	6.7% (2)	<input type="checkbox"/>
Too nervous or afraid	1.3% (1)	4.1% (2)	6.7% (2)	<input type="checkbox"/>
Don't like medical providers	2.6% (2)	10.2% (5)	3.3% (1)	<input type="checkbox"/>
Don't like hospital			3.3% (1)	<input type="checkbox"/>
Had no childcare	2.6% (2)	4.1% (2)	3.3% (1)	<input type="checkbox"/>
Don't understand healthcare system	1.3% (1)	2.0% (1)	0.0% (0)	<input type="checkbox"/>
Language barrier	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Not treated with respect	2.6% (2)	8.2% (4)	0.0% (0)	<input type="checkbox"/>
Transportation problems	1.3% (1)	2.0% (1)	0.0% (0)	<input type="checkbox"/>
Other	18.2% (14)	12.2% (6)	3.3% (1)	<input type="checkbox"/>

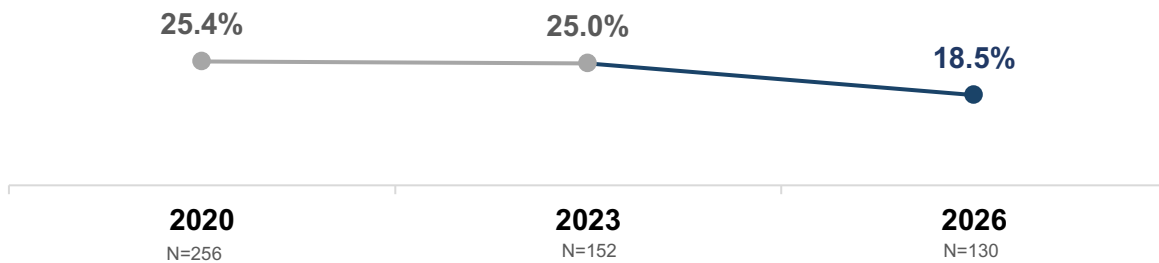
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the top three reasons for delay in seeking healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Roads/weather,” “DDS locally stopped providing service Incompetent!”

(View all comments in Appendix G)

Difficulty Getting or Obtaining Prescriptions (Question 14)

Respondents were asked to indicate if during the last year they or a member of their household had difficulty getting a prescription or taking a prescription regularly. 18.5% of respondents (n=24) indicated that in the last year they had difficulty getting a prescription or taking their medication regularly while 81.5% (n=064) indicated that they did not have trouble getting/taking prescriptions.



Reason for Difficulty Obtaining Prescriptions (Question 15)

23 of the 24 respondents who indicated they or a member of their household had difficulty getting or taking a prescription regularly shared their top three reasons. The top reasons were “Pharmacy did not have prescription when I arrived” (65.2%, n=15), “Mail-order prescriptions took too long” (34.8%, n=8), and “My insurance didn’t cover it” (26.1%, n=6).

Reasons for Difficulty in Receiving Prescription	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	65	37	23	
Pharmacy did not have prescription when I arrived	32.3% (21)	48.6% (18)	65.2% (15)	■
Mail-order prescriptions took too long	40.0% (26)	37.8% (14)	34.8% (8)	□
My insurance didn’t cover it	13.8% (9)	13.5% (5)	26.1% (6)	□
It cost too much	15.4% (10)	16.2% (6)	17.4% (4)	□
It was too far to go	21.5% (14)	37.8% (14)	17.4% (4)	□
Pharmacy wasn’t open when I could go	13.8% (9)	35.1% (13)	17.4% (4)	■
No insurance	3.1% (2)	0.0% (0)	4.3% (1)	□
Transportation problems	1.5% (1)	5.4% (2)	4.3% (1)	□
Had trouble remembering to take pills	1.5% (1)	5.4% (2)	0.0% (0)	□
Other	24.6% (16)	13.5% (5)	21.7% (5)	□

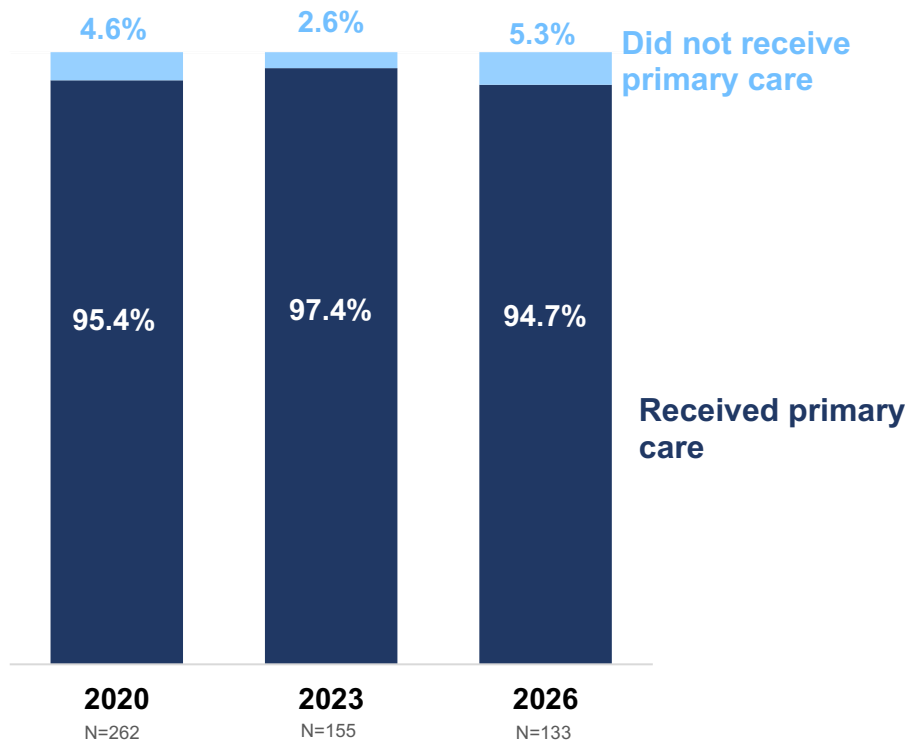
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the top three reasons for difficulty in receiving prescription, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“**Other**” comments included: “Clinic had not called Rx in- several times,” “Clinic not sending prescription to pharmacy.”

(View all comments in Appendix G)

Primary Care Services (Question 16)

94.7% of respondents (n=126) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. 5.3% of respondents (n=7) indicated they had not received primary care.



Location of Primary Care Services (Question 17)

Among survey respondents who indicated receiving primary care services in the previous three years (n=126), 38.7% (n=48) reported receiving care in Circle and 17.7% of respondents (n=22) reported receiving care in Miles City. XX respondents were moved to “Other” due to selecting more than one primary care provider location.

Location of Primary Care Provider	2020 % (n)	2023 % (n)	2026 % (n)
Number of respondents	250	151	124
Circle	61.2% (153)	51.0% (77)	38.7% (48)
Miles City	13.2% (33)	16.6% (25)	17.7% (22)
Glendive	4.0% (10)	6.6% (10)	13.7% (17)
Wolf Point		3.3% (5)	4.0% (5)
Glasgow		2.6% (4)	3.2% (4)
Sidney	4.4% (11)	6.6% (10)	2.4% (3)
Billings	2.0% (5)	1.3% (2)	1.6% (2)
Other*	15.2% (38)	11.9% (18)	18.5% (23)

Grayed out cells indicate the question was not asked that year. Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, may not add up to the total number of respondents.*Respondents (N=21) who selected over the allotted amount were moved to “Other.” Of those 21, 16 selected Circle, 11 selected Billings, and 9 selected Miles City.

“Other” comments included: Dickinson, Poplar, Jordan, Red Lodge, Bozeman, Livingston, Scobey

(View all comments in Appendix G)

View a cross tabulation of where respondents live with where they utilize primary care services on p. 82

Reasons for Primary Care Provider Selection (Question 18)

125 of the 126 respondents who indicated they or someone in their household had been seen by a primary care provider within the past three years shared why they chose that primary care provider. “Closest to home” was the most frequently selected reason at 52.0% (n=65), followed by “Appointment availability” at 39.2% (n=49) and “Prior experience with clinic” at 37.6% (n=47).

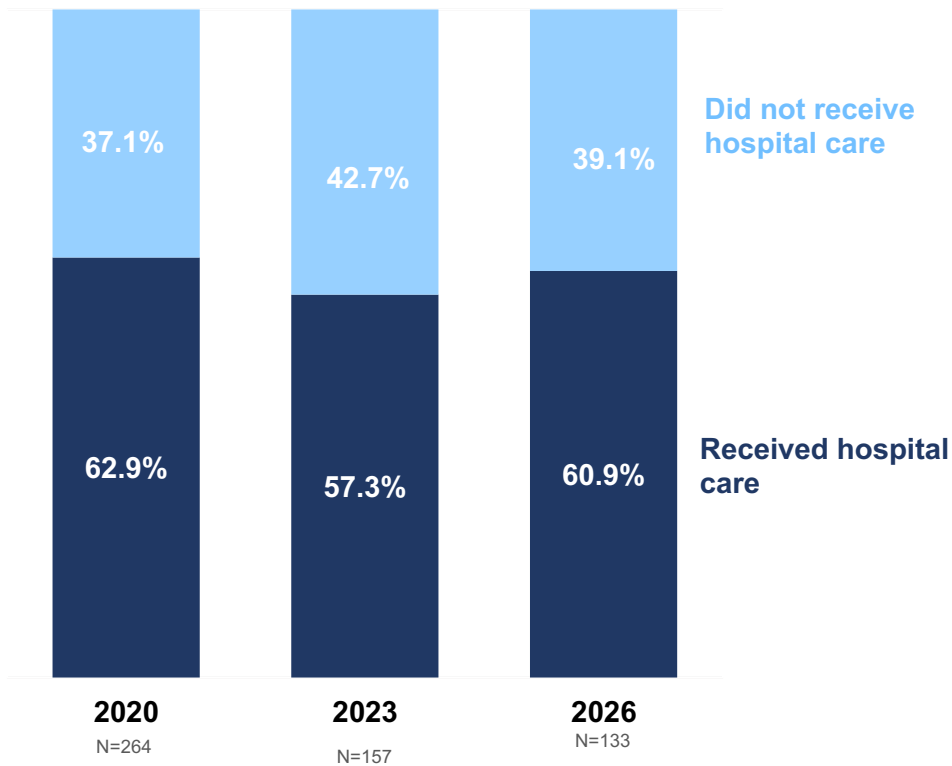
Reasons for Selecting Primary Care Provider	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	250	148	125	
Closest to home	63.2% (158)	54.1% (80)	52.0% (65)	<input type="checkbox"/>
Appointment availability	30.4% (76)	33.1% (49)	39.2% (49)	<input type="checkbox"/>
Prior experience with clinic	48.4% (121)	50.7% (75)	37.6% (47)	<input type="checkbox"/>
Clinic/provider’s reputation for quality	38.0% (95)	41.2% (61)	30.4% (38)	<input type="checkbox"/>
Recommended by family or friends	12.4% (31)	17.6% (26)	16.8% (21)	<input type="checkbox"/>
Referred by physician or other provider	6.8% (17)	7.4% (11)	12.8% (16)	<input type="checkbox"/>
Privacy/confidentiality	13.6% (34)	10.8% (16)	12.0% (15)	<input type="checkbox"/>
Length of waiting room time	6.8% (17)	4.7% (7)	10.4% (13)	<input type="checkbox"/>
Wanted to see a doctor (MD/DO)	12.4% (31)	14.9% (22)	9.6% (12)	<input type="checkbox"/>
Provider’s specialty		12.2% (18)	8.0% (10)	<input type="checkbox"/>
Closest to work			6.4% (8)	<input type="checkbox"/>
VA/Military requirement	1.2% (3)	3.4% (5)	6.4% (8)	<input checked="" type="checkbox"/>
Requiring higher level of care/resources		5.4% (8)	4.8% (6)	<input type="checkbox"/>
Cost of care	6.4% (16)	1.4% (2)	4.0% (5)	<input type="checkbox"/>
Required by insurance plan	0.8% (2)	4.1% (6)	1.6% (2)	<input type="checkbox"/>
Indian Health Services	0.4% (1)	1.4% (2)	0.0% (0)	<input type="checkbox"/>
Other	5.2% (13)	3.4% (5)	4.0% (5)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick the reasons for selection of their primary care provider, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Willing to communicate with me via personal text,” “Female”
(View all comments in Appendix G)

Hospital Care Services (Question 19)

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. 60.9% of respondents (n=81) reported that they or a member of their family had received hospital care during the previous three years, and 39.1% (n=52) had not received hospital services.



Location of Hospital Services (Question 20)

Of the survey respondents who indicated receiving hospital care in the last three years (n=81), 19.8% report utilizing Glendive Medical Center most often, followed by McCone County Health Center at 18.5% (n=15) and Billings Clinic at 17.3% (n=14). 11 respondents were moved to “Other” for selecting more than one hospital location.

Hospital Used Most Often	2020 % (n)	2023 % (n)	2026 % (n)
Number of respondents	160	90	81
Glendive Medical Center (Glendive)	10.6% (17)	12.2% (11)	19.8% (16)
McCone County Health Center (Circle)	22.5% (36)	24.4% (22)	18.5% (15)
Billings Clinic (Billings)	15.6% (25)	13.3% (12)	17.3% (14)
Holy Rosary Healthcare (Miles City)	16.3% (26)	14.4% (13)	11.1% (9)
St. Vincent’s/Intermountain Healthcare (Billings)	13.1% (21)	4.4% (4)	6.2% (5)
Sidney Health Center (Sidney)	5.0% (8)	13.3% (12)	4.9% (4)
Francis Mahon Deaconess Hospital (Glasgow)	1.9% (3)	3.3% (3)	2.5% (2)
Other*	15.0% (24)	14.4% (13)	19.8% (16)

Grayed out cells indicate the question was not asked that year. Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, may not add up to the total number of respondents. *Respondents (N=11) who selected over the allotted amount were moved to “Other.” Of those 11, 8 selected St. Vincent’s/Intermountain Healthcare Billings and 6 selected Holy Rosary Healthcare Miles City.

“Other” comments included: NEMHS Wolf Point (2), Bozeman, UOM Minneapolis, Sanford-Bismarck

(View all comments in Appendix G)

View a cross tabulation of where respondents live with where they utilize hospital services on p. 84

Reasons for Hospital Selection (Question 21)

Of the survey respondents who indicated receiving hospital care in the last three years (n=81), 43.2% of respondents (n=35) stated that “Closest to home” was their top reason for selecting the facility they used most often. “Prior experience with hospital” was the top reason for 42.0% (n=34) and “Referred by physician or other provider” was selected by 38.3% of respondents (n=31).

Reasons for Selecting Hospital	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	166	90	81	
Closest to home	41.6% (69)	43.3% (39)	43.2% (35)	<input type="checkbox"/>
Prior experience with hospital	40.4% (67)	44.4% (40)	42.0% (34)	<input type="checkbox"/>
Referred by physician or other provider	39.2% (65)	43.3% (39)	38.3% (31)	<input type="checkbox"/>
Emergency, no choice	29.5% (49)	25.6% (23)	30.9% (25)	<input type="checkbox"/>
Hospital’s reputation for quality	25.9% (43)	24.4% (22)	23.5% (19)	<input type="checkbox"/>
Closest to work	1.8% (3)	6.7% (6)	7.4% (6)	<input type="checkbox"/>
Privacy/confidentiality	2.4% (4)	6.7% (6)	7.4% (6)	<input type="checkbox"/>
VA/Military requirement	3.0% (5)	2.2% (2)	4.9% (4)	<input type="checkbox"/>
Cost of care	1.8% (3)	2.2% (2)	2.5% (2)	<input type="checkbox"/>
Recommended by family or friends	10.8% (18)	11.1% (10)	2.5% (2)	<input type="checkbox"/>
Required by insurance plan	2.4% (4)	2.2% (2)	2.5% (2)	<input type="checkbox"/>
Financial assistance programs	1.2% (2)	0.0% (0)	1.2% (1)	<input type="checkbox"/>
Other*	6.0% (10)	7.8% (7)	14.8% (12)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=1) who selected over the allotted amount were moved to “Other.”

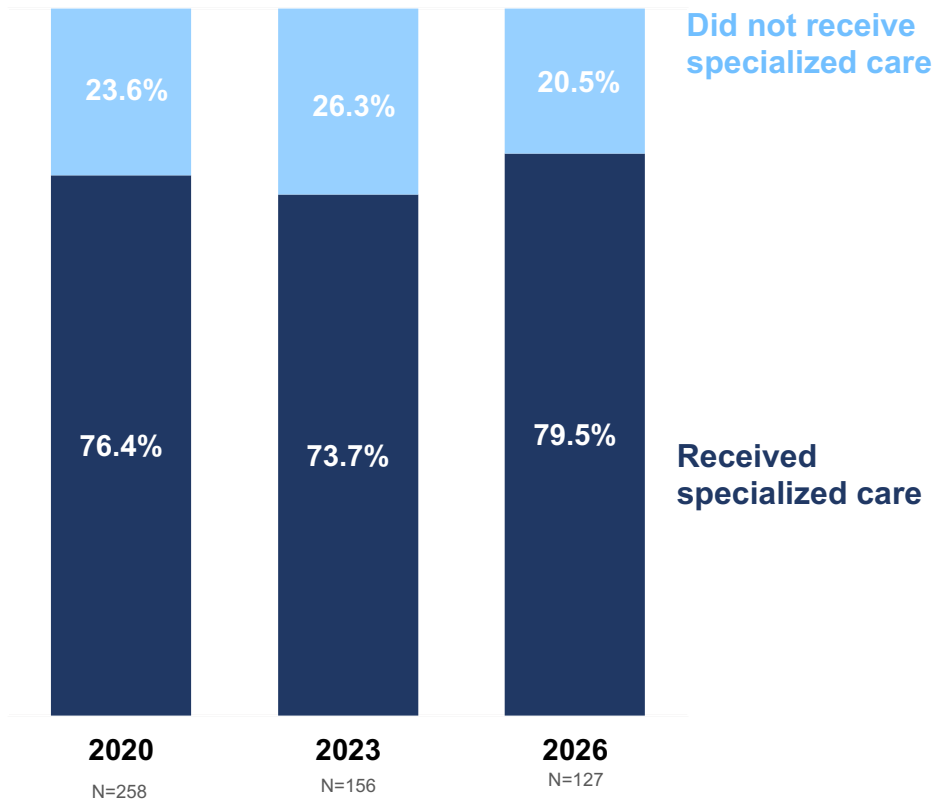
“Other” comments included: “Specialist,” “Newer technology,” “Shop local so we can keep the business”

(View all comments in Appendix G)

View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 85

Specialty Care Services (Question 22)

79.5% of respondents (n=101) indicated they or a household member had seen a healthcare specialist during the past three years, while 20.5% (n=26) indicated they had not.



Location of Healthcare Specialist(s) (Question 23)

100 of the 101 respondents who indicated they saw a healthcare specialist in the past three years shared the location of the healthcare specialist. The top location among survey respondents (43.0%, n=43) was Billings Clinic (Billings). Glendive Medical Center (Glendive) was utilized by 33.0% of respondents (n=33) followed by Holy Rosary Healthcare (Miles City), used by 27.0% of respondents (n=27). Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	197	114	100	
Billings Clinic (Billings)	42.1% (83)	44.7% (51)	43.0% (43)	<input type="checkbox"/>
Glendive Medical Center (Glendive)	25.4% (50)	38.6% (44)	33.0% (33)	<input checked="" type="checkbox"/>
Holy Rosary Healthcare (Miles City)	34.0% (67)	28.1% (32)	27.0% (27)	<input type="checkbox"/>
Billings Clinic (Miles City)	18.3% (36)	16.7% (19)	24.0% (24)	<input type="checkbox"/>
St. Vincent's/Intermountain Healthcare (Billings)	22.3% (44)	21.1% (24)	23.0% (23)	<input type="checkbox"/>
Sidney Health Center (Sidney)	16.2% (32)	17.5% (20)	20.0% (20)	<input type="checkbox"/>
Ortho Montana (Orthopedic surgery)	24.9% (49)	15.8% (18)	8.0% (8)	<input checked="" type="checkbox"/>
Frances Mahon Deaconess Hospital (Glasgow)	6.1% (12)	5.3% (6)	5.0% (5)	<input type="checkbox"/>
Telemedicine consult (Circle)	4.1% (8)	9.6% (11)	4.0% (4)	<input type="checkbox"/>
Other	17.8% (35)	15.8% (18)	21.0% (21)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the location of any specialist seen in the past three years, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Bozeman (2), Billings Dermatology (2)

(View all comments in Appendix G)

Type of Healthcare Specialist Seen (Question 24)

The survey respondents (n=100) saw a wide array of healthcare specialists in the past three years. The most frequently indicated specialist was a “Dermatologist,” with 32.0% of respondents (n=32) having utilized their services. “Dentist” was the second most utilized specialist at 24.0% (n=24), followed by “Optometrist” and “Orthopedic surgeon,” both at 22.0% (n=22 each). Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2020 % (n)	2023 % (n)	2026 % (n)	SIGNIFICANT CHANGE
Number of respondents	197	115	100	
Dermatologist (skin)	22.8% (45)	31.3% (36)	32.0% (32)	<input type="checkbox"/>
Dentist	28.9% (57)	27.0% (31)	24.0% (24)	<input type="checkbox"/>
Optometrist (eye)	17.8% (35)	14.8% (17)	22.0% (22)	<input type="checkbox"/>
Orthopedic surgeon	28.9% (57)	25.2% (29)	22.0% (22)	<input type="checkbox"/>
Cardiologist (heart)	26.9% (53)	20.9% (24)	20.0% (20)	<input type="checkbox"/>
Radiologist (reads X-rays)	17.8% (35)	25.2% (29)	19.0% (19)	<input type="checkbox"/>
Gastroenterologist (throat, stomach, bowels)	12.7% (25)	12.2% (14)	18.0% (18)	<input type="checkbox"/>
Physical therapist	16.2% (32)	17.4% (20)	18.0% (18)	<input type="checkbox"/>
General surgeon	15.7% (31)	15.7% (18)	16.0% (16)	<input type="checkbox"/>
Audiologist (hearing)	7.6% (15)	7.0% (8)	12.0% (12)	<input type="checkbox"/>
OB/GYN	13.7% (27)	15.7% (18)	12.0% (12)	<input type="checkbox"/>
ENT (ear/nose/throat)	11.7% (23)	19.1% (22)	11.0% (11)	<input type="checkbox"/>
Urologist (urinary tract, kidneys, bladder, and urethra)	14.2% (28)	10.4% (12)	11.0% (11)	<input type="checkbox"/>
Oncologist (cancer)	8.1% (16)	12.2% (14)	10.0% (10)	<input type="checkbox"/>
Ophthalmologist (eye surgery)	10.7% (21)	11.3% (13)	8.0% (8)	<input type="checkbox"/>
Podiatrist	5.6% (11)	7.8% (9)	7.0% (7)	<input type="checkbox"/>
Pulmonologist	5.6% (11)	3.5% (4)	7.0% (7)	<input type="checkbox"/>
Neurologist (brain)	10.2% (20)	11.3% (13)	6.0% (6)	<input type="checkbox"/>
Pediatrician (child)	8.1% (16)	8.7% (10)	6.0% (6)	<input type="checkbox"/>
Rheumatologist (arthritis)	3.6% (7)	5.2% (6)	6.0% (6)	<input type="checkbox"/>

Chiropractor	12.2% (24)	18.3% (21)	5.0% (5)	■
Endocrinologist (thyroid, diabetes, infertility, cancers)	6.6% (13)	5.2% (6)	5.0% (5)	□
Mental health therapist	6.6% (13)	8.7% (10)	5.0% (5)	□
Nephrologist (kidneys)	3.6% (7)	0.9% (1)	5.0% (5)	□
Occupational therapist	4.6% (9)	3.5% (4)	4.0% (4)	□
Allergist	4.1% (8)	5.2% (6)	3.0% (3)	□
Dietician	1.0% (2)	1.7% (2)	2.0% (2)	□
Naturopath		2.6% (3)	2.0% (2)	□
Psychiatrist (M.D.)	3.0% (6)	2.6% (3)	2.0% (2)	□
Psychologist	1.0% (2)	0.0% (0)	2.0% (2)	□
Speech therapist	1.5% (3)	0.9% (1)	2.0% (2)	□
Neurosurgeon (brain surgery)	3.0% (6)	5.2% (6)	1.0% (1)	□
Geriatrician (specialist for elderly care)	0.0% (0)	0.0% (0)	0.0% (0)	□
Licensed Addiction Counselor	0.5% (1)	0.0% (0)	0.0% (0)	□
Social worker	0.0% (0)	0.0% (0)	0.0% (0)	□
Other	7.6% (15)	6.1% (7)	6.0% (6)	□

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

Overall Quality of Care of Services in McCone County (Question 25)

Respondents were asked to rate various services available in McCone County using the scale of 4 = Excellent, 3 = Good, 2 = Fair, 1 = Poor, and Don't know/Haven't used. The services that received the highest score were "Assisted Living" and "Laboratory" (3.6 out of 4.0). Overall, the average rating on quality and availability of the health services listed was 3.3 out of 4.0.

Quality of Care Rating at McCone County Health Center	2020 Average (n)	2023 Average (n)	2026 Average (n)	SIGNIFICANT CHANGE
Total number of respondents	235	142	120	
Assisted living		3.4 (45)	3.6 (37)	<input type="checkbox"/>
Laboratory	3.5 (198)	3.4 (123)	3.6 (98)	<input type="checkbox"/>
Ambulance services	3.5 (107)	3.4 (68)	3.4 (51)	<input type="checkbox"/>
Senior center	3.6 (86)	3.4 (60)	3.4 (38)	<input type="checkbox"/>
Emergency room	3.3 (162)	3.3 (90)	3.3 (74)	<input type="checkbox"/>
Home health	3.2 (37)	3.1 (21)	3.3 (19)	<input type="checkbox"/>
Inpatient/hospital care		3.1 (39)	3.3 (27)	<input type="checkbox"/>
Public health	3.2 (124)	3.2 (85)	3.3 (53)	<input type="checkbox"/>
Physical therapy	3.1 (79)	3.3 (53)	3.3 (43)	<input type="checkbox"/>
X-Rays	3.2 (145)	3.3 (88)	3.3 (65)	<input type="checkbox"/>
Clinic services	3.3 (223)	3.1 (133)	3.1 (109)	<input type="checkbox"/>
Long-term care (nursing home)		2.8 (30)	3.0 (30)	<input type="checkbox"/>
Overall average	3.4 (235)	3.3 (142)	3.3 (120)	<input type="checkbox"/>

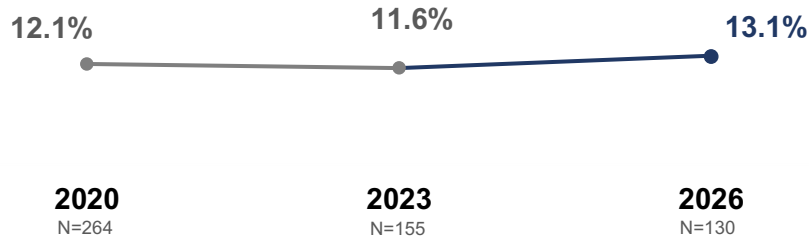
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, will not add up to the total listed for the overall average. Grayed out cells indicate the question was not asked that year.

"Other" comments included: "Internal medicine," "Mammography," "Vascular"

(View all comments in Appendix G)

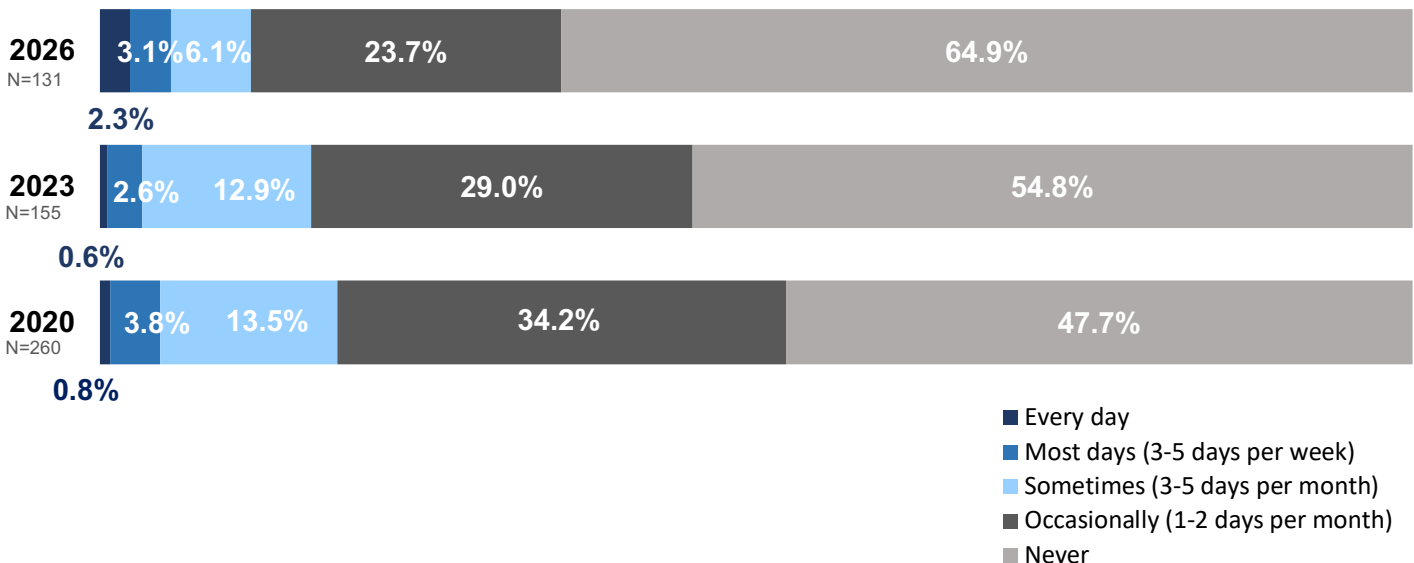
Prevalence of Depression (Question 26)

Respondents were asked to indicate if there were periods of at least three consecutive months in the past three years where they felt depressed on most days. 13.1% of respondents (n=17) indicated they had experienced periods of depression, and 86.9% of respondents (n=113) indicated they had not.



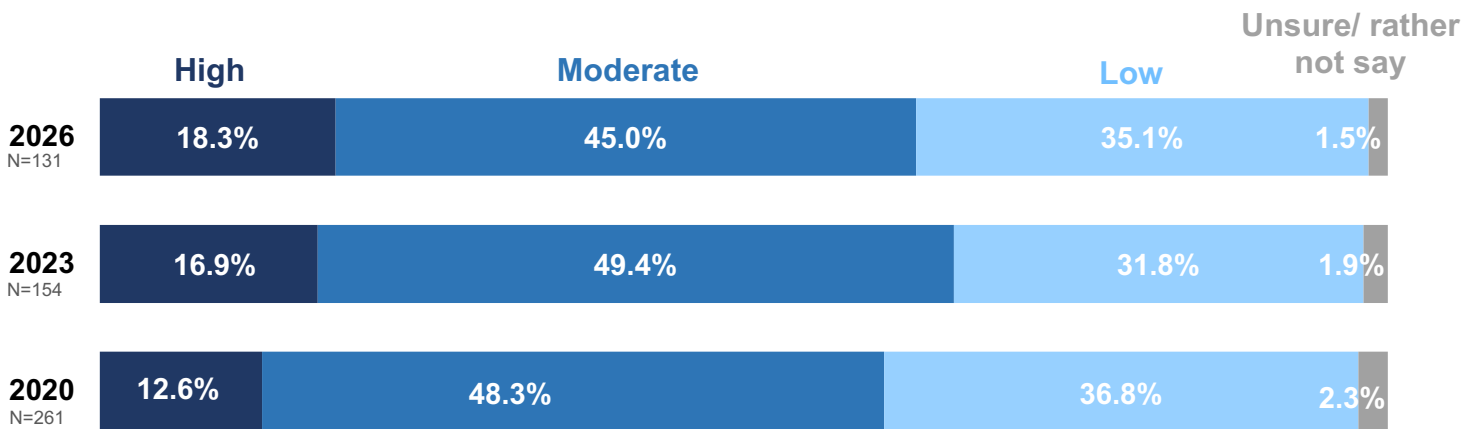
Social Isolation (Question 27)

Respondents were asked to indicate how often they felt lonely or isolated in the past year. 64.9% of respondents (n=85) indicated they never felt lonely or isolated, and 23.7% (n=31) indicated they “Occasionally (1-2 days per month)” felt lonely or isolated. 6.1% (n=8) reported they felt lonely or isolated “Sometimes (3-5 days per month),” 3.1% (n=4) indicated they felt lonely or isolated on “Most days (3-5 days per week),” and 2.3% (n=3) reported they felt lonely or isolated “Every day.”



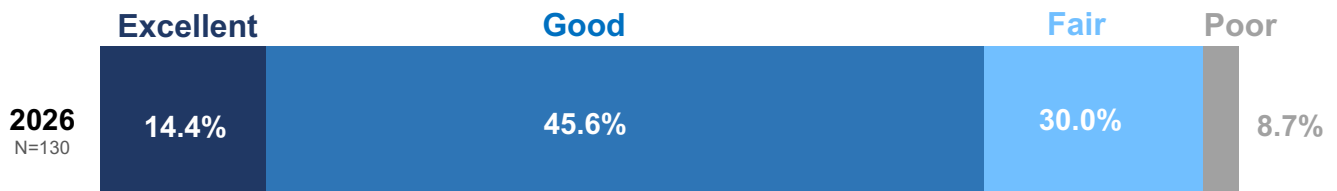
Perception of Stress (Question 28)

Respondents were asked to indicate how they would describe their stress level over the past year. 45.0% of respondents (n=59) indicated they experienced a “Moderate” level of stress, 35.1% (n=46) had a “Low” level of stress, 18.3% of respondents (n=24) indicated they had experienced a “High” level of stress, and 1.5% (n=2) indicated they were “Unsure/rather not say.”



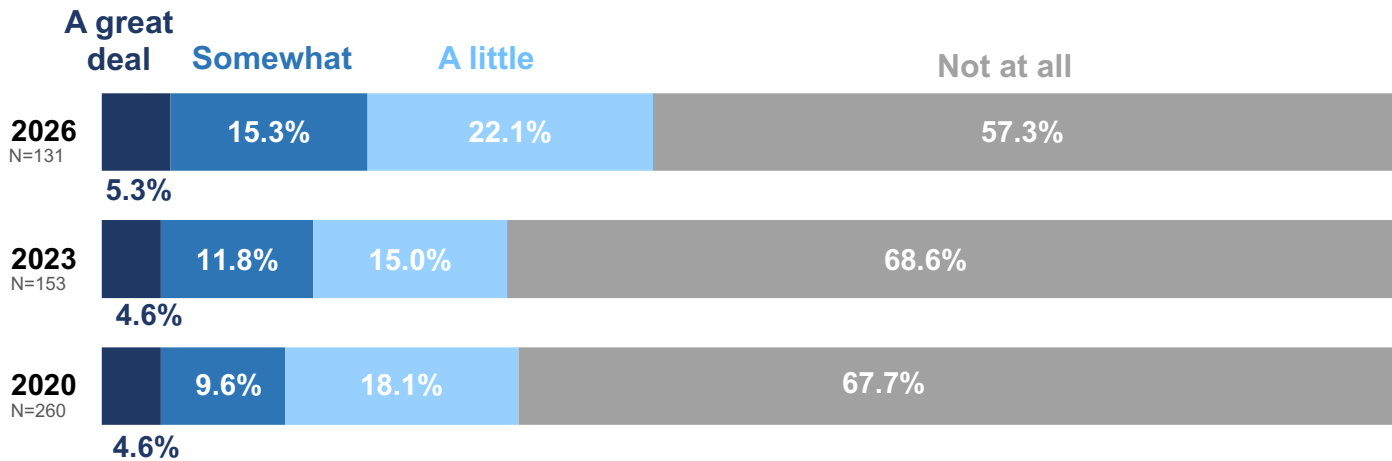
Rating of Mental Health (Question 29)

Respondents were asked to indicate how they would describe their mental health in general when considering stress, anxiety, depression, and emotional problems. 45.6% of respondents (n=58) felt their mental health was “Very good,” 36.5% (n=57) rated their mental health as “Good,” 17.3% of respondents (n=27) felt their mental health was “Excellent,” 7.7% (n=12) rated their mental health and “Fair,” and 1.3% of respondents (n=2) rated their mental health as “Poor.”



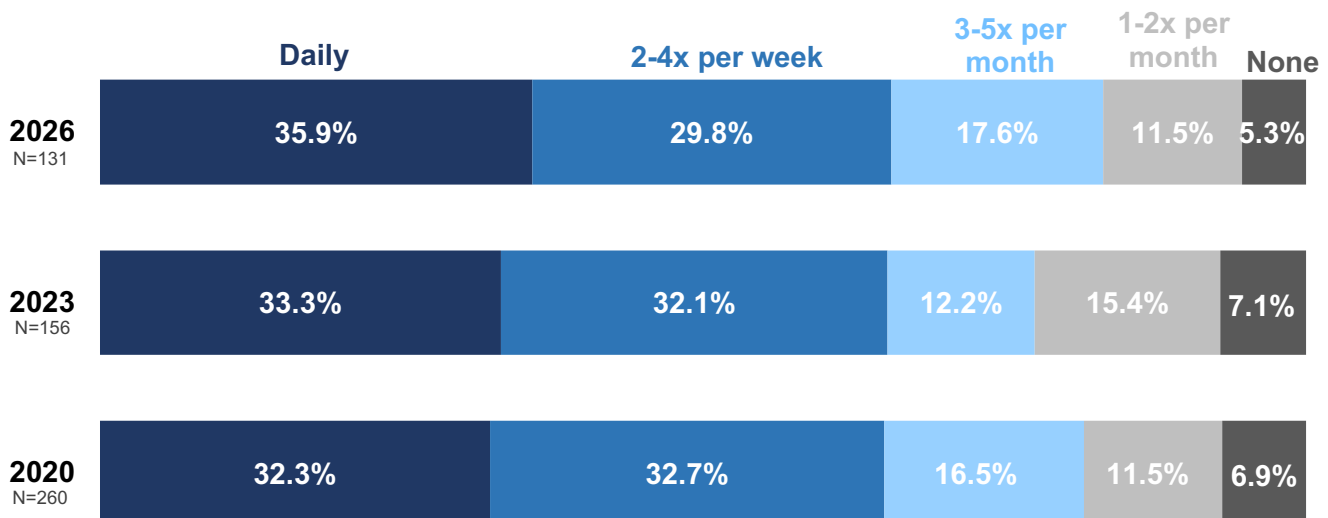
Impact of Substance Abuse (Question 30)

Respondents were asked to indicate to what degree their life has been negatively affected by their own or someone else’s substance abuse issues including alcohol, prescription, or other drugs. 57.3% of respondents (n=75) indicated their life was “Not at all” affected. 22.1% (n=29) were “A little” affected, 15.3% (n=20) were “Somewhat” affected, and 5.3% (n=7) were “A great deal” negatively affected.



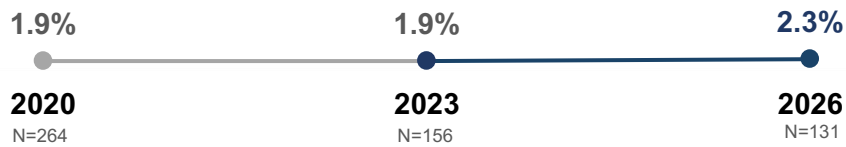
Physical Activity (Question 31)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. 35.9% of respondents (n=47) indicated they had physical activity “Daily,” and 29.8% (n=39) indicated they had physical activity “2-4 times per week.” 17.6% of respondents (n=23) indicated they had physical activity “3-5 times per month,” 11.5% (n=15) indicated they had physical activity “1-2 times per month,” and 5.3% (n=7) indicated they had “No physical activity.”



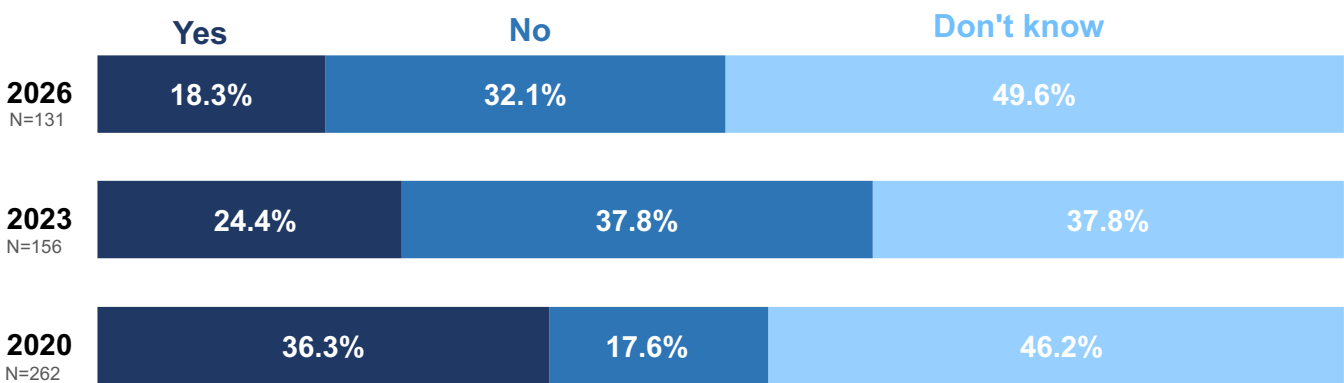
Food Insecurity (Question 32)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 97.7% (n=128), were not worried, but 2.3% (n=3) were concerned about not having enough to eat.



Housing (Question 33)

Respondents were asked to indicate if they felt the community has adequate and affordable housing options available. 49.6% of respondents (n=65) indicated that don't know if there are adequate and affordable housing options available in the community. 32.1% of respondents (n=42) felt there were not adequate and affordable options available, and 18.3% (n=24) feel that there are.



Health Insurance Type (Question 34)

Respondents were asked to indicate what type of health insurance covers the majority of their medical expenses. 32.1% (n=42) indicated they have “Medicare” coverage. 27.5% (n=36) indicated they have “Employer sponsored” coverage. XX respondents were moved to “Other” for selecting over the allotted one health insurance type.

Type of Health Insurance	2020 % (n)	2023 % (n)	2026 % (n)
Number of respondents	264	158	131
Medicare	28.4% (75)	32.9% (52)	32.1% (42)
Employer sponsored	34.1% (90)	26.6% (42)	27.5% (36)
Health Insurance Marketplace	6.8% (18)	10.1% (16)	9.2% (12)
Medicaid	2.7% (7)	1.9% (3)	4.6% (6)
Private insurance/private plan	3.0% (8)	5.7% (9)	4.6% (6)
Healthy MT Kids	3.8% (10)	3.2% (5)	2.3% (3)
VA/Military	1.9% (5)	2.5% (4)	2.3% (3)
None/pay out of pocket	1.9% (5)	2.5% (4)	1.5% (2)
Health Savings Account	0.8% (2)	1.9% (3)	0.8% (1)
Indian Health	0.0% (0)	0.6% (1)	0.0% (0)
Other*	16.7% (44)	12.0% (19)	15.3% (20)

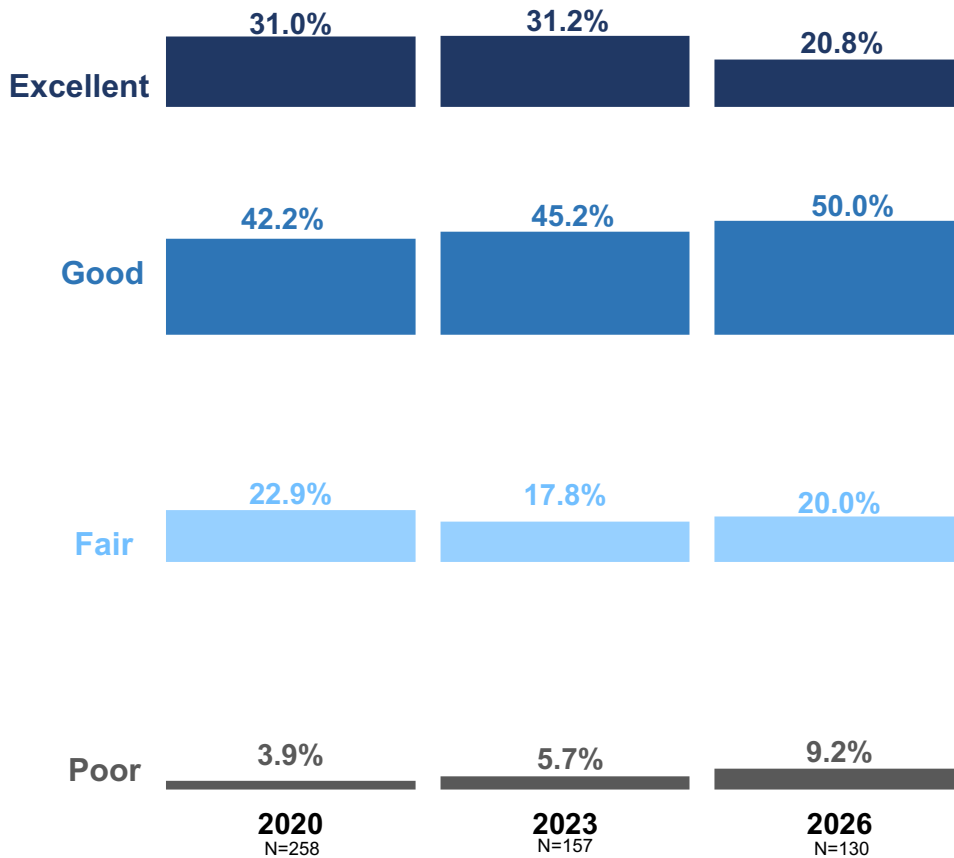
Statistical significance was not measured as reporting differed between 2023 and the previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. *Respondents (N=17) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “Blue Cross,” “Blue Cross/Supplement Blue Shield”

(View all comments in Appendix G)

Insurance and Healthcare Costs (Question 35)

Respondents were asked to indicate how well they feel their health insurance covers their healthcare costs. 50.0% of respondents (n=65) indicated they felt their insurance covers a “Good” amount of their healthcare costs. 20.8% of respondents (n=27) indicated they feel their insurance was “Excellent,” 20.0% (n=26) indicated they felt their insurance was “Fair,” and 9.2% (n=12) feel their health insurance covers a “Poor” amount of their healthcare costs.



Reasons for No Insurance (Question 36)

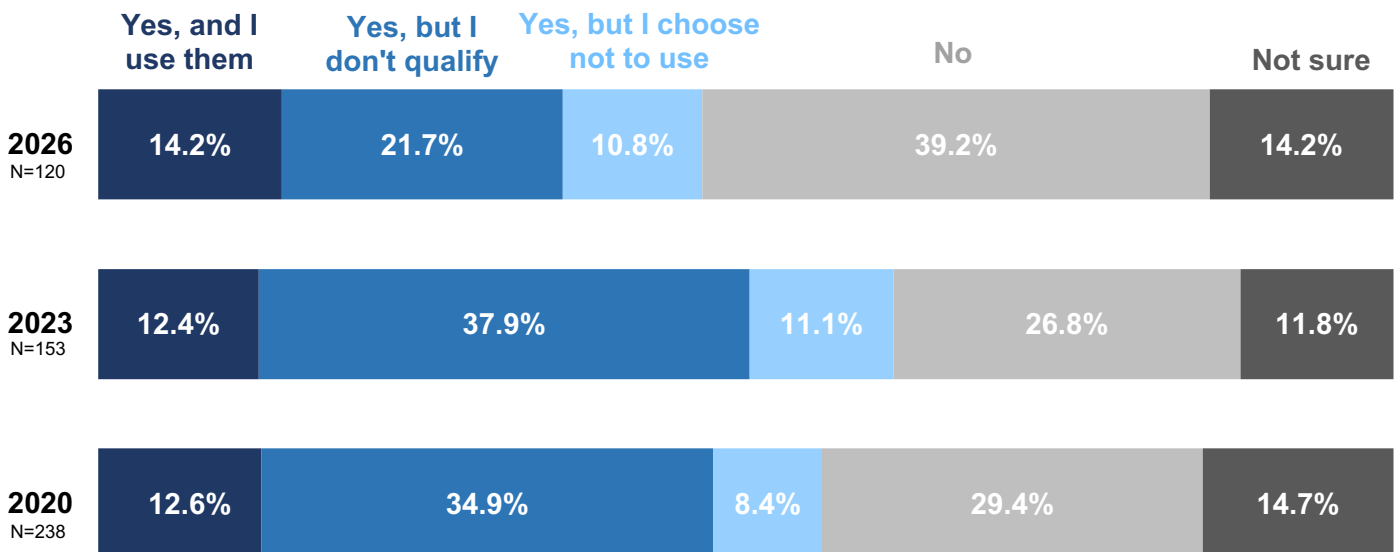
Respondents who do not have health insurance (n=2) were asked what their reasons were. The top reason was “Can’t afford to pay for medical insurance,” followed by “Choose not to have medical insurance.” Repsondents could choose all applicable answers.

Reasons for No Health Insurance	2020 %(n)	2026 %(n)
Number of respondents	5	2
Can't afford to pay for medical insurance	60.0% (3)	100.0% (2)
Choose not to have medical insurance	20.0% (1)	50.0% (1)
Employer does not offer insurance	20.0% (1)	0.0% (0)
Too confusing/don't know how to apply	0.0% (0)	0.0% (0)
Other	0.0% (0)	0.0% (0)

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Grayed out cells indicate the question was not asked that year.

Awareness of Health Cost Assistance Programs (Question 37)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare expenses. 39.2% of respondents (n=47) shared that they are not aware of these programs. 21.7% (n=26) indicated they were aware but don’t qualify, 14.2% (n=17, each) were both aware of these programs and use them and were not sure if they are aware of the programs, and 10.8% (n=13) were aware of the programs but choose not to utilize them.





KEY INFORMANT INTERVIEW RESULTS

Key Informant Interviews

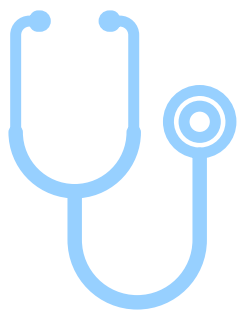
Methodology

Three key informant interviews were conducted in spring of 2026. Participants were identified as people living in McCone County Health Center’s service area.

The interviews were conducted over the telephone. The meetings lasted up to 15 minutes in length and followed the same line of questioning. Interview transcripts can be found in Appendix I. Interviews were facilitated by Montana Office of Rural Health staff.

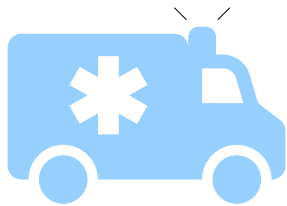
Themes

The following key findings, themes, and health needs emerged from the responses which participants gave to the line of questioning found in Appendix H.



HEALTHCARE RECRUITMENT & RETENTION

A common thread in interviews was a concern for the continuity of healthcare workforce. Overall, interview participants were grateful for having access to and ensuring the success of McCone County Health Center. While community members were generally happy with the quality of care, appointment availability, and current providers, they shared concerns about the costs and feasibility of the longevity of those resources. Having high quality providers continues to get more expensive, and it is important to have enough local utilization of services and providers to make the costs even out.



SERVICES AVAILABLE

Key informants expressed gratitude for the services available in Circle. Having the clinic and emergency department locally, as well as emergency services, has been wonderful for the healthcare and health of the community. Informants voiced that they are able to get appointments at the clinic in a timely fashion and that EMS does a great job serving the community.

For seniors, the assisted living facility and nursing home are an amazing asset to have locally. The services could be expanded if possible, because there is such a demand for them. The senior center and nursing home could use some facility updates.

There was acknowledgement that for services that exceed basic medical services, community members have to travel to a larger city, such as Billings or Miles City. Participants voiced understanding that this is the situation in rural places, and also expressed the desire to have more specialty services locally, either in the form of telehealth or visiting providers.

SERVICES & RESOURCES NEEDED IN THE COMMUNITY



- Dentist
- Eye doctor
- Pharmacy
- Specialists via telehealth
- New equipment for ED/EMS
- Updates to the nursing home
- Pediatrician
- Outreach about available services
- Enhanced CPS services



EXECUTIVE SUMMARY

Executive Summary

The table below shows a summary of results from the McCone County Health Center Community Health Needs Assessment. Areas of opportunity were determined after consideration of various criteria, including a comparison to data from local, state, and federal sources (Secondary data); survey results; those issues of greatest concern identified by the community partners through key informant interviews; and the potential impact of a given issue.

Areas of Opportunity	Secondary Data	Survey	Interviews
Access to Healthcare Services			
<i>Cost assistance programs</i>		✓	
<i>More information about available services</i>		✓	
<i>More primary care providers</i>		✓	☑
<i>More specialty care options</i>		✓	☑
<i>More telehealth</i>		✓	☑
Health Conditions & Behaviors			
<i>Alcohol/substance use</i>	⊗	✓	
<i>Cancer</i>	⊗	✓	☑
<i>Mental health issues</i>	⊗		
<i>OB/Pediatrics</i>		✓	☑
<i>Weight/nutrition/fitness</i>	⊗	✓	☑
Other			
<i>Senior care & services</i>			☑
<i>Food security</i>		✓	



NEXT STEPS & RESOURCES

Prioritization of Health Needs

The community steering committee, comprised of staff leaders from McCone County Health Center and community members from McCone County, convened to begin an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through the Community Health Services Development (CHSD) Process.

The community steering committee determined the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives representing the broad interest of the community, including those with public health expertise (see Appendix B for additional information regarding input received from community representatives). The prioritized health needs as determined through the assessment process and which the collaborators will be addressing over the next three years relates to the following healthcare issues:

- Access to health services
- Awareness of health resources

McCone County Health Center will determine which needs or opportunities could be addressed considering their organization's parameters of resources and limitations. The committee will prioritize the needs/opportunities using the additional parameters of the organizational vision, mission, and/or values, as well as existing and potential community partners.

The participants will create goals to achieve through strategies and activities, as well as the general approach to meeting the stated goal (i.e., staff member responsibilities, timeline, potential community partners, anticipated impact(s), and performance/evaluation measures). This plan will be documented and posted along with the CHSD assessment report.

Available Community Resources

In prioritizing the health needs of the community, the following list of potential community partners and resources in which to assist in addressing the needs identified in this report were identified. As the steering committee continues to meet, more resources will continue to be identified, therefore, this list is not exhaustive.

- The McCone County Public Health Department provides health and prevention services to the area.
- The McCone County Senior Center enhances the lives of senior citizens living in the community. The center provides educational resources and serves as a gathering place for community members of all ages. Does Senior lunch on Tuesday and Friday.
- The Circle Chamber of Commerce is a voluntary organization created to meet and advance the civic needs of the community. The Chamber organizes the annual Town and Country Day event in the community, as well as other events throughout the year.
- The Montana Health Network (MHN) is a consortium of healthcare organizations collaborating to develop products and services needed to make healthcare more stable, efficient and cost effective. MCHC is a MHN shareholder.
- Billings Clinic provides educational resources, reference lab services, x-ray overread services and Group Purchasing to MCHC.
- Holy Rosary Healthcare provides educational resources and support to MCHC.
- Rocky Mountain Health Network (RMHN) is a Montana, tax paying, not-for-profit company organized as a Physician Hospital Organization offering administrative services to its members. MCHC is a member of RMHN.
- The Eastern Montana Telemedicine Network (EMTN) is a consortium of not-for-profit medical and mental health facilities linking health care providers and their patients throughout Montana and Wyoming.
- The Montana Hospital Association (MHA) is a nonprofit organization and offers a variety of services, including advocacy of members' interests with state and federal governmental agencies and legislative bodies, regulatory assistance, comparative data products, purchasing programs, education and communications.
- The Great Northern Development Corporation (GNDC) provides grant and business development support and services to empower the Northeast Montana region to reach their economic goals.
- Montana Facility Finance Authority provides tax-exempt bond financing, low interest loans and limited planning grants for non-for-profit healthcare organizations.
- Montana State University Extension provides unbiased research-based education and information that integrates learning, discovery, and engagement to strengthen the social, economic, and environmental well-being of individuals, families, and communities.

- The Montana Office of Rural Health is dedicated to improving access to quality health care for rural Montana by providing collaborative leadership and resources to healthcare and community organizations.
- The Economic Development Administration (EDA) provides funding for local economic development planning, infrastructure for economic development projects, and capitalization of local and regional revolving loan funds for businesses.
- The Centers for Medicare & Medicaid Services (CMS) administers the Medicare, Medicaid and CHIP programs and is committed to strengthening and modernizing the nation's health care system to provide access to high quality care and improved health at lower cost.
- Homestead Health provides home health services to the McCone County and the surrounding counties. Provide skilled nursing care in your home.
- Revive and Thrive is a new mobile IV therapy service in McCone County and services the surrounding counties. Offers a selection of infusions from immune therapy, rehydration, etc.
- STAT AIR provides air ambulance services to the community. They offer education to their shareholders at no charge. MCHC are shareholders of STAT AIR.

Evaluation of Previous CHNA & Implementation Plan

McCone County Health Center (MCHC) provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The MCHC Board of Directors approved its previous implementation plan on November 17, 2020. The plan prioritized the following health issues:

- Mental and behavioral health
- Access to healthcare services
- Health, wellness, and prevention

The following tables include completed activities, accomplishments and impacts/outcomes within the facility’s proposed goals. To view the full Implementation Plan visit: mcconehealth.org.

Goal 1: Enhanced mental and behavioral health services throughout McCone County.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 1.1: Sustain and enhance mental and behavioral health services/resources in McCone County.	Continue to offer pain management services to reduce the travel burden of community members by utilizing telehealth services.	Our Providers are seeing pain management patients and treating them.	N/A
	Explore mental health resources available through the Montana Farm and Ranch Stress Assistance Network. When feasible, promote the utilization of these resources. Support and partner with local Ag Organizations who	We share the Frontier Wellness link on our Facebook page	N/A

	apply for the mini-grants that help pay for mental health speakers, workshops and training that support the Montana agricultural communities.		
	Explore opportunities to champion the completion of free and low cost mental and behavioral health training by MCHC staff and community members.	N/A	N/A

Goal 2: Improve access to healthcare services throughout McCone County.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 2.1: Improve knowledge of available healthcare services and resources.	Continue to disseminate outreach and education throughout the service area of new and continuing providers, including locum providers and their schedules.	Our Providers have went to the Senior Center to talk about what MCHC offers. They have done 1 Q&A session with the seniors.	The seniors had positive feedback regarding the Q&A session and we will continue to do this.
	Champion healthcare workforce pipeline activities that expose local adolescents to potential careers in the rural areas. This includes but is not limited to: <ul style="list-style-type: none"> Exploring the feasibility of hosting a REACH Camp (Research and Explore Awesome Careers in Healthcare). 	We did host a TNCC class at our facility in April 2026.	N/A

	<ul style="list-style-type: none"> Disseminating outreach throughout the service area for upcoming MedStart and Heads Up Camps. 		
	<p>Continue to develop community education regarding the use and benefits of utilizing telehealth services. Including, but not limited to:</p> <ul style="list-style-type: none"> Modify with additional and discontinued services as appropriate. Explore the feasibility of connecting with the Northwest Regional Telehealth Resource Center (NRTRC) to create a Telehealth Access Point (TAP) 	<p>We do Telehealth for specialist through EMTN for specialty Providers in Billings. We will initiate offering patients telehealth appointments dependent upon their insurance.</p>	N/A
<p>Strategy 2.2: Continue to champion opportunities to alleviate barriers associated with accessing necessary health services.</p>	<p>Continue to partner with the local senior center on the transportation program, particularly to deliver prescriptions to local seniors. As needed, seek funding to sustain this necessary service.</p>	<p>We are still doing this.</p>	N/A
	<p>Provide training to new providers and nursing staff on available transportation and pharmacy resources available throughout the service area.</p>	N/A	N/A
	<p>Explore opportunities to expand access to health</p>	<p>Have reached out to specialty providers to</p>	N/A

	services locally (i.e. dentistry, dermatology, and CT Scan, etc.).	do out reach clinics at our facility and have not been successful.	
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Goal 3: Enhance health, wellness, and prevention outreach throughout McCone County.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 3.1: Sustain MCHC's presence in the community as a source of reliable health education, programs and resources.	Develop a relationship with the McCone County Extension Office to learn about their services and discuss shared goals and opportunities for partnership/alignment.	N/A	N/A
	Disseminate outreach and education on timely health topics via newsletter, local newspaper, and social media.	Have done a few social media posts	N/A
	Stay apprised and responsive to creative opportunities aimed at promoting healthy lifestyles.	N/A	N/A



APPENDICES

Appendix A – Steering Committee

<i>Steering Committee Member</i>	Organization Affiliation
<i>Jacque Gardner</i>	CEO, McCone County Health Center (MCHC)
<i>Bridget Loudon</i>	Business Office Manager, MCHC



Appendix B – Public Health & Populations Consultation

Public Health & Populations Consultation - a leader or representative of populations such as medically underserved, low-income, minority and/or populations with chronic disease.

Name/Organization

Jacque Gardner, CEO – McCone County Health Center (MCHC)

Type of Consultation (Steering Committee Meetings, Key Informant Interviews, etc.)

First Steering Committee Meeting	December 19, 2025
Key Informant Interviews	Spring 2026
Second Steering Committee Meeting	May 12, 2026

Public and Community Health

- Chronic conditions are big issues here – hypertension, diabetes, COPD
- Lower rates of chronic conditions than the state averages
- Cancer rates are about equal with state rates
- High colorectal cancer rates
- High melanoma rates – makes sense with ranching population
- Mental health is issue here too – more people are getting care for it and being open about it (especially younger and middle aged people)
 - o There was a counselor who would come once a month but then everyone would know who was seeing them since they would come to a certain room at the hospital – lack of confidentiality made this not so used
- The hospital offers a lot of services that people aren't so aware of – physical therapy, labs, etc

Population: Low-Income, Underinsured

- Lower than the state rates on poverty and uninsured
- It's hard for people to get help filling out social services forms – it takes a while, and it's all on the phone; there's nowhere you can go in person for help with that (Havre or Billings are the closest)

Population: Seniors

- Population of seniors is lower than I expected – but if you consider the whole county not just Circle it makes more sense

- Senior center has bus that goes to Glendive every Wednesday for senior medications and appointments; they'll also go to Miles City or Glasgow for appointments

Population: Youth

- We could talk to the principal for a key informant interview
- We has a visiting OB for 6-8 months but nobody really used her – not sure why – maybe they didn't want to transfer care, but we thought she would have been popular

Population: Veterans

- Lots of veterans here
- I wish people knew that things the VA refers for can be done in Circle, like labs – MCHC can do a lot of those things
- The VA could be more supportive of small facilities instead of referring to only Glendive or Miles City

Appendix C – McCone County Secondary Data

This data was primarily pulled from Montana DPHHS Community Health Insights (<https://dphhs.mt.gov/publichealth/epidemiology/CommunityHealthInsights>)

Demographic Measure		County			Montana				
Population		8,975			1,137,000				
Population Density		0.7			7.7				
Veteran Status		10.4%			7.5%				
Disability Status		31.9%			31.9%				
Age		<18	18-64	65+	<18	18-64	65+		
		16%	53%	31%	20%	59%	18%		
Gender		Male		Female		Male		Female	
		52%		48%		51%		49%	
Race/Ethnic Distribution	White	91%			84%				
	American Indian or Alaska Native	4%			5.5%				

Social Determinants of Health		County		Montana	
Median Household Income		\$67,420		\$70,804	
Unemployment Rate		0.8%		2.8%	
Adults with a High School Diploma		95.4%		94.6%	
Owner-Occupied Housing Units		80.6%		69.4%	
Persons Below Poverty Level		6.7%		11.8%	
Children in Poverty		8.1%		13.5%	
Internet at Home		87.3%		88.7%	
Households Without a Vehicle		1.8%		4.6%	
Uninsured Adults <i>Age 18-64</i>		6.0%		10.7%	

Health Behaviors		County		Montana	
Adult Smoking		14.4%		12.4%	
Adult Obesity		26.9%		30.5%	
Physical Inactivity		21.8%		19.6%	

Chronic Conditions <i>2019-2023</i>	County	Montana
Hypertension	35.1%	32.3%
High Cholesterol	34.2%	34.0%
Heart disease <i>Hospitalization rate per 100,000</i>	870.5	1605.6
Kidney disease <i>Hospitalization rate per 100,000</i>	429.5	967.9
Diabetes <i>Hospitalization rate per 100,000</i>	404.5	907.7
Chronic Obstructive Pulmonary Disease (COPD) <i>Hospitalization rate per 100,000</i>	118.7	343.8
Asthma <i>Hospitalization rate per 100,000</i>	148.7	301.3
Chronic liver disease and cirrhosis <i>Hospitalization rate per 100,000</i>	87.1	282.6
Stroke <i>Hospitalization rate per 100,000</i>	108.1	226.6

Cancers <i>Diagnosis rates per 100,000;</i> <i>2019-2023</i>	County	Montana
All invasive cancers	399.9	434.4
Prostate cancer	110.3	131.9
Female breast cancer	115.5	137.2
Lung cancer	31.8	44.8
Colorectal cancer	45.7	36.3
Melanoma	34.5	27.1

Maternal & Infant Health <i>2019-2023</i>	County	Montana
General Fertility Rate <i>Per 1,000 women ages 15-44</i>	53.8	54.2
Teen Fertility Rate <i>Per 1,000 girls ages 15-19</i>	-	13.3
Total births (count)	342	55,342
Tobacco use during pregnancy	-	10.4%
Gestational diabetes	8.5%	6.6%
Low birth weight births	6.4%	7.6%
Preterm births	7.6%	9.6%

Injuries & Violence <i>Age-adjusted rate per 100,000 people (2019-2023)</i>	County	Montana
Suicide Deaths	-	27.9
Suicidal ideation and self-harm ED visits	-	63.6
Unintentional injury deaths	38.5	63.2
Non-fatal motor vehicle crash ED visits	189.6	408.9
Assault ED visits	-	250.6

Mental/Behavioral Health & Substance Use	County	Montana
Frequent mental distress (2023)	35.1%	32.2%
Binge drinking among adults (2023)	34.2%	34.0%
Ever diagnosed with depression (2023)	26.9%	30.5%
ED encounter for all drug overdose <i>Rate per 100,000 (2019-2023)</i>	-	179.2
ED encounter for cannabis use <i>Rate per 100,000 (2019-2023)</i>	53.9	264.2
ED encounters for alcohol use <i>Rate per 100,000 (2019-2023)</i>	139.6	1126.5

Communicable & Enteric Diseases <i>Rate per 100,000 people (2019-2023)</i>	County	Montana
Total Count of Reportable Disease Cases (count)	22	-
Chlamydia	-	375.0
Gonorrhea	-	123.3
Hepatitis C (chronic)	-	97.0
E. coli	-	9.5
Salmonellosis	-	14.1
Campylobacteriosis	-	31.6

Appendix D – Survey Cover Letter

McCone County Health Center

Website: www.mcconehealth.org

MONTH ##, 2026

Dear [LASTNAME] household:

Participate in our Community Health Needs Assessment survey for a chance to
Win one of two (2) \$50 Visa gift cards

McCone County Health Center (MCHC) in Circle, Montana is partnering with the Montana Office of Rural Health (MORH) to administer a community health needs assessment survey. The purpose of the survey is to obtain information from a wide range of participants to assist in planning our programs, services, and facilities to best serve our community. Your help is critical in determining health priorities and planning for future needs.

Your name has been randomly selected as a resident who lives in the MCHC service area. The survey covers topics such as: use of health care services, awareness of services, community health, health insurance, and demographics. We know your time is valuable, so we have made an effort to keep the survey to about 15 minutes. Participating in this survey is completely voluntary and your identity and answers will remain confidential.

1. Due date to complete survey: DATE
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <https://www.montana.edu/socialdata/currentsurveys.html>. Select "McCone County Health Center Survey." Your access code is [CODED]
4. The winners of the \$50 Visa gift cards will be contacted the week of DATE.

All survey responses will go to Social Data Collection and Analysis Services (Social Data), previously known as the HELPS Lab, at Montana State University in Bozeman, Montana, the organization that is assisting MORH with this project. If you have any questions about the survey, please call MORH at 406-994-6986. We believe, with your help, we can continue to improve healthcare services in our region.

Thank you for your assistance. We appreciate your time.

Sincerely,



Jacque Gardner, Chief Executive Officer

Appendix E – Survey Instrument

Community Health Needs Assessment Survey Circle, Montana

INSTRUCTIONS: Please complete this survey by marking the appropriate boxes and then return it in the enclosed postage-paid envelope. If you need assistance, please contact the Montana Office of Rural Health at 406-994-6986. Participation is voluntary; your responses will remain confidential. You can choose not to answer any question and can stop at any time.

1. How would you rate the general health of our community?
 - Very healthy Healthy Somewhat healthy Unhealthy Very unhealthy

2. In the following list, what do you think are the **three most serious** health concerns in our community? **(Select ONLY 3)**

<ul style="list-style-type: none"> <input type="checkbox"/> Alcohol/substance use <input type="checkbox"/> Allergy-related issues <input type="checkbox"/> Alzheimer's/dementia <input type="checkbox"/> Cancer <input type="checkbox"/> Child abuse/neglect <input type="checkbox"/> Diabetes <input type="checkbox"/> Domestic violence <input type="checkbox"/> Heart disease <input type="checkbox"/> Hunger <input type="checkbox"/> Lack of access to healthcare 	<ul style="list-style-type: none"> <input type="checkbox"/> Lack of dental care <input type="checkbox"/> Lack of exercise <input type="checkbox"/> Mental health issues (depression, anxiety, PTSD, etc.) <input type="checkbox"/> Motor vehicle accidents <input type="checkbox"/> Overweight/obesity <input type="checkbox"/> Recreation related accidents/injuries <input type="checkbox"/> Respiratory issues/illnesses <input type="checkbox"/> Social isolation/loneliness 	<ul style="list-style-type: none"> <input type="checkbox"/> Stroke <input type="checkbox"/> Suicide <input type="checkbox"/> Tobacco use (cigarettes/cigars, vaping, smokeless) <input type="checkbox"/> Trauma/Adverse Childhood Experiences (ACES) <input type="checkbox"/> Work/economic stress <input type="checkbox"/> Work related accidents/injuries <input type="checkbox"/> Other: _____
--	--	--

3. Select the **three** items below that you believe are **most important** for a healthy community **(select ONLY 3)**:

<ul style="list-style-type: none"> <input type="checkbox"/> Access to childcare/after school programs <input type="checkbox"/> Access to healthcare services <input type="checkbox"/> Access to healthy foods <input type="checkbox"/> Affordable housing <input type="checkbox"/> Arts and cultural events <input type="checkbox"/> Clean environment 	<ul style="list-style-type: none"> <input type="checkbox"/> Community involvement <input type="checkbox"/> Good jobs and a healthy economy <input type="checkbox"/> Good schools <input type="checkbox"/> Healthy behaviors and lifestyles <input type="checkbox"/> Low crime/safe neighborhoods <input type="checkbox"/> Low death and disease rates <input type="checkbox"/> Low level of domestic violence 	<ul style="list-style-type: none"> <input type="checkbox"/> Opportunities for physical activity <input type="checkbox"/> Parks and recreation <input type="checkbox"/> Religious or spiritual values <input type="checkbox"/> Strong family life <input type="checkbox"/> Tolerance for diversity <input type="checkbox"/> Transportation services <input type="checkbox"/> Other: _____
--	--	---

4. How do you rate your knowledge of the health services that are available through McCone County Health Center?
 - Excellent Good Fair Poor

5. How do you learn about the health services available in our community? **(Select ALL that apply)**

<ul style="list-style-type: none"> <input type="checkbox"/> Billboards/posters <input type="checkbox"/> Circle Banner <input type="checkbox"/> Friends/family <input type="checkbox"/> Healthcare provider <input type="checkbox"/> Mailings/newsletter 	<ul style="list-style-type: none"> <input type="checkbox"/> Newspaper <input type="checkbox"/> Presentations <input type="checkbox"/> Public health <input type="checkbox"/> Radio <input type="checkbox"/> Senior center 	<ul style="list-style-type: none"> <input type="checkbox"/> Social media/Facebook <input type="checkbox"/> Website/internet <input type="checkbox"/> Word of mouth/reputation <input type="checkbox"/> Other: _____
--	--	---

6. Which community health resources, other than the hospital or clinic, have you used in the last three years? **(Select ALL that apply)**

<ul style="list-style-type: none"> <input type="checkbox"/> Conroy Care (Assisted living) <input type="checkbox"/> Chiropractor 	<ul style="list-style-type: none"> <input type="checkbox"/> Dentist (Pediatric school program) <input type="checkbox"/> Eye doctor <input type="checkbox"/> Fitness center at The Bin 	<ul style="list-style-type: none"> <input type="checkbox"/> Homestead (Home health services) <input type="checkbox"/> Massage therapy <input type="checkbox"/> Meals on Wheels
---	--	---

- Privacy/confidentiality
- Too long to wait for an appointment
- Too nervous or afraid
- Transportation problems
- Unsure if services were available
- Want to see a doctor (MD/DO)
- Other: _____

14. In the last year, was there a time when you or a member of your household had difficulty getting a prescription or taking a prescription regularly?
 Yes No **(If no, skip to question 16)**

15. What were the **three** most important reasons why you or a member of your household did not get or take your medications/prescriptions (as prescribed by your provider)? **(Select ONLY 3)**

- Pharmacy did not have prescription when I arrived
- Had trouble remembering to take pills
- It cost too much
- It was too far to go
- Mail-order prescriptions took too long
- My insurance didn't cover it
- No insurance
- Pharmacy wasn't open when I could go
- Transportation problems
- Other: _____

16. In the past three years, have you or a household member seen a primary healthcare provider such as a family physician, physician assistant or nurse practitioner for healthcare services?
 Yes No **(If no, skip to question 19)**

17. Where was that primary healthcare provider located? **(Select ONLY 1)**

- Circle
- Billings
- Glasgow
- Glendive
- Miles City
- Sidney
- Wolf Point
- Other: _____

18. Why did you select the primary care provider you are currently seeing? **(Select ALL that apply)**

- Appointment availability
- Clinic/provider's reputation for quality
- Closest to home
- Closest to work
- Cost of care
- Indian Health Services
- Length of waiting room time
- Prior experience with clinic
- Privacy/confidentiality
- Provider's specialty
- Recommended by family or friends
- Referred by physician or other provider
- Required by insurance plan
- Requiring higher level of care/resources
- VA/Military requirement
- Wanted to see a doctor (MD/DO)
- Other: _____

19. In the past three years, has anyone in your household received care in a hospital? (i.e., hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology or emergency care)
 Yes No **(If no, skip to question 22)**

20. If yes, which hospital does your household use **MOST** for hospital care? **(Select ONLY 1)**

- McCone County Health Center (Circle)
- Billings Clinic (Billings)
- Glendive Medical Center (Glendive)
- Frances Mahon Deaconess Hospital (Glasgow)
- Holy Rosary Healthcare (Miles City)
- Sidney Health Center (Sidney)
- St. Vincent's/Intermountain Healthcare (Billings)
- Other: _____

21. Thinking about the hospital you were at most frequently, what were the **three most important** reasons for selecting that hospital? **(Select ONLY 3)**

- Closest to home
- Closest to work
- Cost of care
- Emergency, no choice
- Financial assistance programs

- Hospital's reputation for quality
- Prior experience with hospital
- Privacy/confidentiality
- Recommended by family or friends
- Referred by physician or other provider
- Required by insurance plan
- VA/Military requirement
- Other: _____

22. In the past three years, have you or a household member seen a healthcare specialist (other than your primary care provider/family doctor) for healthcare services?
 Yes No (If no, skip to question 25)

23. Where was the healthcare specialist seen? **(Select ALL that apply)**

- Telemedicine consult (Circle)
- Billings Clinic (Billings)
- Billings Clinic (Miles City)
- Frances Mahon Deaconess Hospital (Glasgow)
- Glendive Medical Center (Glendive)
- Holy Rosary Healthcare (Miles City)
- Ortho Montana (Orthopedic surgery)
- Sidney Health Center (Sidney)
- St. Vincent's/Intermountain Healthcare (Billings)
- Other: _____

24. What type of healthcare specialist was seen? **(Select ALL that apply)**

- Allergist
- Audiologist (hearing)
- Cardiologist (heart)
- Chiropractor
- Dentist
- Dermatologist (skin)
- Dietician
- Endocrinologist (thyroid, diabetes, infertility, cancers)
- ENT (ear/nose/throat)
- Gastroenterologist (throat, stomach, bowels)
- General surgeon
- Geriatrician (specialist for elderly care)
- Licensed Addiction Counselor
- Mental health therapist
- Naturopath
- Nephrologist (kidneys)
- Neurologist (brain)
- Neurosurgeon (brain surgery)
- OB/GYN
- Occupational therapist
- Oncologist (cancer)
- Ophthalmologist (eye surgery)
- Optometrist (eye)
- Orthopedic surgeon
- Pediatrician (child)
- Physical therapist
- Podiatrist (feet)
- Psychiatrist (M.D.)
- Psychologist
- Pulmonologist (lungs)
- Radiologist (reads X-rays)
- Rheumatologist (arthritis)
- Social worker
- Speech therapist
- Urologist (urinary tract, kidneys, bladder, and urethra)
- Other: _____

25. The following services are available in McCone County. Please rate the overall quality for each service by circling your answer. **(Please circle N/A if you have not used the service)**

	Excellent	Good	Fair	Poor	Haven't Used	Don't Know
Ambulance services	4	3	2	1	N/A	DK
Assisted living	4	3	2	1	N/A	DK
Clinic services	4	3	2	1	N/A	DK
Emergency room	4	3	2	1	N/A	DK
Home health	4	3	2	1	N/A	DK
Inpatient/hospital care	4	3	2	1	N/A	DK
Laboratory	4	3	2	1	N/A	DK
Long-term care (nursing home)	4	3	2	1	N/A	DK
Physical therapy	4	3	2	1	N/A	DK
Public health	4	3	2	1	N/A	DK

Senior center	4	3	2	1	N/A	DK
X-Rays	4	3	2	1	N/A	DK

26. In the past three years, have there been periods of at least three consecutive months where you felt depressed on most days?

- Yes No

27. In the past year, how often have you felt lonely or isolated?

- Every day Sometimes (3-5 days per month) Never
 Most days (3-5 days per week) Occasionally (1-2 days per month)

28. Thinking over the past year, how would you describe your stress level?

- High Moderate Low Unsure/rather not say

29. Thinking about your mental health (which includes stress, anxiety, depression and problems with emotions), how would you rate your mental health in general?

- Excellent Good Fair Poor

30. To what degree has your life been negatively affected by your own or someone else's substance use issues, including alcohol, prescription or other drugs?

- A great deal Somewhat A little Not at all

31. Over the past month, how often have you had physical activity for at least 20 minutes?

- Daily 3-5 times per month No physical activity
 2-4 times per week 1-2 times per month

32. In the past year, did you worry that you would not have enough food?

- Yes No

33. Do you feel that the community has adequate and affordable housing options available?

- Yes No Don't know

34. What type of health insurance covers the **majority** of your household's medical expenses? (**Select ONLY 1**)

- Employer sponsored Healthy MT Kids VA/Military
 Health Insurance Marketplace Medicaid None/pay out of pocket
 Health Savings Account Medicare Other: _____
 Private insurance/private plan

35. How well do you feel your health insurance covers your healthcare costs?

- Excellent Good Fair Poor

36. If you **do NOT** have health insurance, why? (**Select ALL that apply**)

- Can't afford to pay for health insurance Employer does not offer insurance Other: _____
 Choose not to have health insurance Too confusing/don't know how to apply

37. Are you aware of programs that help people pay for healthcare expenses?

- Yes, and I use them Yes, but I do not qualify Yes, but choose not to use

No

Not sure

Demographics

All information is kept confidential and your identity is not associated with any answers.

38. Where do you currently live, by zip code?

59215 Circle

59274 Vida

59201 Wolf Point

59214 Brockway

59337 Jordan

59330 Glendive

59259 Richey

59339 Lindsay

Other: _____

59349 Terry

39. What is your gender? _____

40. What age range represents you?

18-24

35-44

55-64

75-84

25-34

45-54

65-74

85+

41. What is your employment status?

Work full-time

Self-employed full-time

Unemployed, but looking

Work part-time

Self-employed part-time

Not currently seeking employment

Retired

Student

Other: _____

Collect disability

[CODED]

Please return in the postage-paid envelope enclosed with this survey or mail to:

Social Data Collection and Analysis Services

Montana State University

PO Box 172245

Bozeman, MT 59717

THANK YOU VERY MUCH FOR YOUR TIME

Please note that all information will remain confidential

Appendix F – Cross Tabulation Analysis

Knowledge Rating of McCone County Health Center by How Respondents Learn About Healthcare Services

	Excellent	Good	Fair	Poor	Total
Billboards/posters	20.0% (4)	55.5 (11)	20.0% (4)	5.0% (1)	20
Circle Banner	27.3% (9)	60.6% (20)	9.1% (3)	3.0% (1)	33
Friends/family	10.1% (7)	60.9% (42)	20.3% (14)	8.7% (6)	69
Healthcare provider	20.8% (10)	64.6% (31)	12.5% (6)	2.1% (1)	48
Mailings/newsletter	9.1% (1)	45.5% (5)	36.4% (4)	9.1% (1)	11
Newspaper	27.3% (3)	36.4% (4)	9.1% (1)	27.3% (3)	11
Presentations	-	50.0% (1)	50.0% (1)	-	2
Public health	20.7% (6)	62.1% (18)	13.8% (4)	3.4% (1)	29
Radio	-	25.0% (1)	50.0% (2)	25.0% (1)	4
Senior center	33.3% (4)	58.3% (7)	8.3% (1)	-	12
Social media/Facebook	15.3% (9)	54.2% (32)	25.4% (15)	5.1% (3)	59
Website/internet	6.3% (1)	50.0% (8)	31.3% (5)	12.5% (2)	16
Word of mouth/reputation	14.7% (11)	60.0% (45)	20.0% (15)	5.3% (4)	75
Other	16.7% (1)	50.0% (3)	16.7% (1)	16.7% (1)	6

Delay or Did Not Get Need Healthcare Services by Residence

	Yes	No	Total
59215 Circle	23.9% (16)	76.1% (51)	67
59214 Brockway	25.0% (2)	75.0% (6)	8
59259 Richey	30.0% (6)	70.0% (14)	20
59274 Vida	33.3% (6)	66.7% (12)	18
59339 Lindsay	16.7% (2)	83.3% (10)	12
59330 Glendive	-	100.0% (1)	1
Other	-	100.0% (1)	1
TOTAL	25.2% (32)	74.8% (95)	127

59201 Wolf Point removed from residence due to non-response.

Location of primary care clinic most utilized by residence

	Circle	Billings	Glasgow	Glendive	Miles City	Sidney	Wolf Point	Other	TOTAL
59215 Circle	45.6% (31)	1.5% (1)	2.9% (2)	7.4% (5)	17.6% (12)	1.5% (1)	2.9% (2)	20.6% (14)	68
59214 Brockway	37.5% (3)	-	-	-	37.5% (3)	-	-	25.0% (2)	8
59259 Richey	50.0% (9)	5.6% (1)	-	27.8% (5)	5.6% (1)	5.6% (1)	-	5.6% (1)	18
59274 Vida	22.2% (4)	-	11.1% (2)	5.6% (1)	16.7% (3)	-	16.7% (3)	27.8% (5)	18
59339 Lindsay	9.1% (1)	-	-	45.5% (5)	27.3% (3)	9.1% (1)	-	9.1% (1)	11
Other	-	-	-	100.0% (1)	-	-	-	-	1
TOTAL	38.7% (48)	1.6% (2)	3.2% (4)	13.7% (17)	17.7% (22)	2.4% (3)	4.0% (5)	18.5% (23)	124

59201 Wolf Point and 59330 Glendive removed from residence due to non-response.

Location of primary care provider most utilized by reasons for clinic/provider selection

	Circle	Billings	Glasgow	Glendive	Miles City	Sidney	Wolf Point	Other	TOTAL
Appointment availability	44.9% (22)	-	6.1% (3)	8.2% (4)	16.3% (8)	2.0% (1)	2.0% (1)	20.4% (10)	49
Clinic/provider's reputation for quality	27.0% (10)	-	10.8% (4)	16.2% (6)	18.9% (7)	-	-	27.0% (10)	37
Closest to home	58.5% (38)	1.5% (1)	1.5% (1)	6.2% (4)	1.5% (1)	1.5% (1)	6.2% (4)	23.1% (15)	65
Closest to work	50.0% (4)	-	-	25.0% (2)	-	-	-	25.0% (2)	8
Cost of care	-	-	-	40.0% (2)	20.0% (1)	-	-	40.0% (2)	5
Length of waiting room time	41.7% (5)	-	8.3% (1)	8.3% (1)	25.0% (3)	-	-	16.7% (2)	12
Prior experience with clinic	47.8% (22)	-	8.7% (4)	4.3% (2)	15.2% (7)	2.2% (1)	4.3% (2)	17.4% (8)	46
Privacy/confidentiality	6.7% (1)	-	-	-	53.3% (8)	-	6.7% (1)	33.3% (5)	15
Provider's specialty	-	-	-	20.0% (2)	60.0% (6)	-	-	20.0% (2)	10
Recommended by family or friends	19.0% (4)	-	-	28.6% (6)	28.6% (6)	4.8% (1)	9.5% (2)	9.5% (2)	21
Referred by physician or other provider	37.5% (6)	-	-	25.0% (4)	12.5% (2)	12.5% (2)	-	12.5% (2)	16
Required by insurance plan	50.0% (1)	-	-	50.0% (1)	-	-	-	-	2
Requiring higher level of care/resources	-	-	-	33.3% (2)	33.3% (2)	-	-	33.3% (2)	6
VA/Military requirement	37.5% (3)	12.5% (1)	-	12.5% (1)	25.0% (2)	-	-	12.5% (1)	8
Want to see a doctor (MD/DO)	16.7% (2)	-	8.3% (1)	8.3% (1)	33.3% (4)	-	-	33.3% (4)	12

Other	20.0% (1)	-	-	-	40.0% (2)	-	20.0% (1)	20.0% (1)	5
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Indian Health Services removed from reasons clinic selected due to non-response.

Location of most utilized hospital by residence

	McCone County Health Center (Circle)	Billings Clinic (Billings)	Glendive Medical Center (Glendive)	Frances Mahon Deaconess Hospital (Glasgow)	Holy Rosary Healthcare (Miles City)	Sidney Health Center (Sidney)	St. Vincent's/Intermountain Healthcare (Billings)	Other	Total
59215 Circle	25.5% (12)	12.8% (6)	19.1% (9)	2.1% (1)	8.5% (4)	6.4% (3)	8.5% (4)	17.0% (8)	47
59214 Brockway	16.7% (1)	16.7% (1)	-	-	33.3% (2)	-	-	33.3% (2)	6
59259 Richey	8.3% (1)	16.7% (2)	41.7% (5)	-	8.3% (1)	8.3% (1)	-	16.7% (2)	12
59274 Vida	12.5% (1)	25.0% (2)	12.5% (1)	12.5% (1)	12.5% (1)	-	-	25.0% (2)	8
59339 Lindsay	-	28.6% (2)	14.3% (1)	-	14.3% (1)	-	14.3% (1)	28.6% (2)	7
59330 Glendive	-	100.0% (1)	-	-	-	-	-	-	1
TOTAL	18.5% (15)	17.3% (14)	19.8% (16)	2.5% (2)	11.1% (9)	4.9% (4)	6.2% (5)	19.8% (16)	81

59201 Wolf Point and Other removed from residence due to non-response.

Location of most recent hospitalization by reasons for hospital selection

	McCone County Health Center (Circle)	Billings Clinic (Billings)	Glendive Medical Center (Glendive)	Frances Mahon Deaconess Hospital (Glasgow)	Holy Rosary Healthcare (Miles City)	Sidney Health Center (Sidney)	St. Vincent's (Billings)	Other	Total
Closest to home	42.9% (15)	2.9% (1)	25.7% (9)	-	5.7% (2)	5.7% (2)	-	17.1% (6)	35
Closest to work	66.7% (4)	-	16.7% (1)	-	-	-	-	16.7% (1)	6
Cost of care	50.0% (1)	-	-	50.0% (1)	-	-	-	-	2
Emergency, no choice	32.0% (8)	20.0% (5)	20.0% (5)	-	4.0% (1)	-	-	24.0% (6)	25
Financial assistance programs	-	100.0% (1)	-	-	-	-	-	-	1
Hospital's reputation for quality	5.3% (1)	10.5% (2)	15.8% (3)	5.3% (1)	26.3% (5)	10.5% (2)	10.5% (2)	15.8% (3)	19
Prior experience with hospital	23.5% (8)	8.8% (3)	20.6% (7)	5.9% (2)	17.6% (6)	2.9% (1)	8.8% (3)	11.8% (4)	34
Privacy/confidentiality	-	33.3% (2)	33.3% (2)	-	33.3% (2)	-	-	-	6
Recommended by family or friends	-	-	50.0% (1)	-	-	-	-	50.0% (1)	2
Referred by physician or other provider	6.5% (2)	22.6% (7)	16.1% (5)	-	16.1% (5)	3.2% (1)	12.9% (4)	22.6% (7)	31
Required by insurance plan	-	-	-	-	-	-	50.0% (1)	50.0% (1)	2
VA/Military requirement	-	25.0% (1)	-	-	50.0% (2)	-	25.0% (1)	-	4
Other	16.7% (2)	8.3% (1)	25.0% (3)	-	8.3% (1)	16.7% (2)	8.3% (1)	16.7% (2)	12

Appendix G – Responses to Other & Comments

2. In the following list, what do you think are the **three most serious** health concerns in our community? (**Select ONLY 3**)

- The poisons in our Air and worse in our food
- Lack of eye care
- POLLUTION

*Responses when more than 3 were selected (1 participant)

- Alcohol/substance use (1)
- Alzheimer's/dementia (1)
- Cancer (1)
- Diabetes (1)
- Heart disease (1)
- Overweight/obesity (1)
- Social isolation/loneliness (1)
- Stroke (1)

3. Select the **three** items below that you believe are **most important** for a healthy community (**select ONLY 3**):

- Chiropractic
- Church attendance

*Responses when more than 3 were selected (1 participant):

- Access to childcare/after school programs (1)
- Access to healthcare services (1)
- Affordable housing (1)
- Good jobs and a healthy economy (1)
- Good schools (1)
- Healthy behaviors and lifestyles (1)
- Religious or spiritual values (1)
- Strong family life (1)

5. How do you learn about the health services available in our community? (**Select ALL that apply**)

- Work
- Moved to community
- NEVER HEAR ANYTHING
- Ambulance Service
- Lifetime user of the facility
- Employer mandated drug testing

6. Which community health resources, other than the hospital or clinic, have you used in the last three years? (Select ALL that apply)

- ER
- Dentist and Surgery
- BALANCE THERAPY(1)
- NONE (3 participants)
- Out of town doctors

7. In your opinion, what would improve our community's access to healthcare? (Select ALL that apply)

- Equal insurance payment for any licensed provider
- Dermatology
- None (2 participants)
- Paid Emergency Responders
- Need for CT & pharmacy
- Willingness to acknowledge mental health issues
- Preventive/natural
- All Above
- Not having to travel for every test other than xray. Like CT scans , ultrasounds etc

8. If any of the following classes/programs were made available to the community, which would you be most interested in attending? (Select ALL that apply)

- Chiropractor
- Natural supplement health

9. What additional healthcare services would you use if available locally? (Select ALL that apply)

- Chiropractor
- None
- Pharmacy
- Specialists

11. Which of the following preventive services have you or someone in your household used in the past year? (Select ALL that apply)

- Cologuard
- Oncology
- SLT GLAUCOMA TREATMENT
- Thermology

13. If yes, what were the three most important reasons why you did not receive healthcare services? (Select ONLY 3)

- Roads/weather

- DDS locally stopped providing service Incompetent!

15. What were the **three most important reasons why you or a member of your household did not get or take your medications/prescriptions (as prescribed by your provider)? (Select **ONLY 3**)**

- Providers getting refills subscriptions done timely
- Clinic had not called Rx in- several times
- Clinic not sending prescription to pharmacy.
- Provider slow to transmit prescription to pharmacy
- Wasn't called into pharmacy in a timely matter

17. Where is the primary healthcare provider that your household uses MOST located? (Select **ONLY 1)**

- Dickenson, ND
- Poplar
- Jordan
- Red Lodge
- Bozeman
- Livingston
- Scobey

*Responses when more than 1 was selected (21 participants):

- Circle (16)
- Billings (11)
- Glasgow (3)
- Glendive (6)
- Miles City (9)
- Sidney (4)
- Wolf Point (4)

18. Why did you select the primary care provider you are currently seeing? (Select **ALL that apply)**

- Female
- Willing to communicate w/ me via personal text
- Had no choice
- Doctor Retired
- History w/ same provider and do not agree w/ provider in Circle.

20. If yes, which hospital does your household use **MOST for hospital care? (Select **ONLY 1**)**

- NEMHS Wolf Point (2 participants)
- Bozeman
- UOM Minneapolis Mn.
- Sanford-Bismarck

*Responses when more than 1 was selected (11 participants):

- McCone County Health Center (Circle) (4)
- Billings Clinic (Billings) (4)
- Glendive Medical Center (Glendive) (3)
- Holy Rosary Healthcare (Miles City) (6)
- Sidney Health Center (Sidney) (3)
- St. Vincent's/Intermountain Healthcare (Billings) (8)

21. Thinking about the hospital you were at most frequently, what were the three most important reasons for selecting that hospital? (Select ONLY 3)

- Specialist
- Primary Care Provider
- Newer Technology
- Surgery
- Only Hospital able to take care of urgent issue
- Physician Flies there
- Closest w/service I needed
- Had to see a liver doctor
- Shop local so we can keep the business
- Insurance

*Responses when more than 3 were selected (1 participant):

- Closest to home (1)
- Closest to work (1)
- Hospital's reputation for quality (1)
- Prior experience with hospital (1)

23. Where was the healthcare specialist seen? (Select ALL that apply)

- Billings Dermatology , Sidney Dental, Shopco Optometry
- Bismarck, ND
- Bozeman (2 participants)
- BILLINGS DERMATOLOGY (2 participants)
- Sanford-Bismarck
- Billings, Dermatologist for surgery
- Hogan Family Dental
- Pullman, WA (there for school)
- WOLF POINT
- Telemedicine, 0 in Circle
- McCone Health Center
- Dickinson
- Glasgow private
- Logan Health Bozeman/Great Falls
- Hearing & Speech Connection

- Billings
- Rocky Mountain Vein Clinic

25. What type of healthcare specialist was seen? (Select ALL that apply)

- Internal Medicine
- Mammography
- Cancer specialist Sidney, MT
- Vascular
- Macular & retinal specialist
- Vein

34. What type of health insurance cover the majority of your household's medical expenses? (Select ONLY 1)

- Blue Cross/Supplement Blue Shield
- Workers comp
- Blue Cross
- Health share

***Responses when more than 1 was selected (17 participants):**

- Employer sponsored (2)
- Health Insurance Marketplace (4)
- Health Savings Account (3)
- Medicaid (1)
- Medicare (13)
- Private insurance/private plan (7)
- VA/Military (4)
- None/Pay out of pocket (3)

36. If you do NOT have health insurance, why? (Select ALL that apply)

- N/A

38. Where do you currently live, by zip code?

- 59315

39. What is your gender? Responses other than "Male" or "Female"

- Male + Female
- Female/both (answers includes)
- Female [age redacted] & Male [age redacted]
- 2 peo M+F

41. What is your employment status?

- Homemaker

***Responses when more than 1 was selected (7 participants):**

- Work full-time (1)

- Work part-time (5)
- Retired (3)
- Self-employed full-time (2)
- Self-employed part-time (2)
- Student (1)

General comments

- (Q2)
 - Crossed out “Suicide” and drew an arrow to “Mental health issues (depression, anxiety, PTSD, etc.)” which was selected.
- (Q13)
 - Selected both “It cost too much” and “My insurance didn’t cover it” and connected the two with a line.
- (Q18)
 - Selected “VA/Military requirement” and wrote “Hospital in another area did not understand the importance of V.A. Care!” next to it.
- (Q20)
 - Did not select “Sidney Health Center (Sidney)” but wrote “OBGYN-Babies” next to it.
- (Q25)
 - For “Laboratory” selected both “3” and “N/A.”
 - Did not rate “Home health”, “Physical therapy”, “Public health”, and “Senior center” and wrote “NA” next to the services.
 - For “Home health” selected both “3” and “N/A”, and for “Long-term care (nursing home)” selected both “4” and “2.”
 - For all services selected both “N/A” and “DK.”
 - For “Laboratory” selected both “4” and “N/A.”
 - For “Ambulance services” selected “1” and wrote “*Need more people!!*” next to it.
- (Q34)
 - Selected “Health Insurance Marketplace” and “Medicare” and wrote “only part B” next to “Medicare.”
- (Q35)
 - Did not select any of the choices and wrote in and circled “N/A”.
- (Q41)
 - Selected both “Retired” and “Self-employed full-time” and indicated each selection was for a different member of the household.
 - Selected “Retired” and wrote in “But looking for part time work – keep busy” in the “Other” choice.
 - Selected “Self-employed part-time” and wrote in “Farmer/rancher” in the “Other” choice.

- Selected “Self-employed part-time” and wrote in “Work comp” in the “Other” choice.
- (Q40)
 - Selected “75-84” and wrote “Both of us” next to it.

Appendix H – Key Informant Interview Questions

Purpose: The purpose of key informant interviews is to identify motives of local residents when selecting healthcare providers and why people may leave the community to seek health services. This research will help determine the awareness of local programs and services, as well as satisfaction or dissatisfaction with local services, providers, and facilities.

1. How do you feel about the general health of your community?
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic
 - EMS Services (ER/Ambulance)
 - Public/County Health Department
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - Services for Young Adults/Families
 - Services for Low-Income Individuals
3. What do you think are the most important local healthcare issues?
 -
4. What other healthcare services are needed in the community?
 -
5. What would make your community a healthier place to live?
 -

Appendix I – Key Informant Interview Notes

Key Informant Interview #1

Date: 2/25/26

Anonymous

Via phone

1. How do you feel about the general health of your community?
 - It's concerning the number of people dying of cancer. It's been crazy lately, more than usual.
 - There are a lot of elderly people who need one-on-one care.

2. What are your views/opinions about these local services:
 - Hospital/clinic
 - I think, for the size of the community, we have a good clinic. Good offering of services.
 - EMS Services (ER/Ambulance)
 - We have a volunteer ambulance association here. They do a wonderful job.
 - The ED could use some better equipment if they could afford it.
 - Public/County Health Department
 - No experience recently.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - We are blessed with an ALF here that is privately owned. They do a fantastic job.
 - Nursing home does the best they can with what they have. Traveling nursing costs a lot of money.
 - Seniors have a great program. They could always use some funding.
 - We have Action for Eastern Montana that has a senior program (Senior Companions), and the programs have been cut back recently in Circle. This has really affected our elderly population.
 - Services for Young Adults/Families
 - I'm not really aware that we have any.
 - Services for Low-Income Individuals
 - We have a good food bank here. I don't really know how those services are; I am unfamiliar with the services provided.

3. What do you think are the most important local healthcare issues?
 - I feel like CPS [Child Protective Services] is a failure in our community.
 - Cancer

4. What other healthcare services are needed in the community?
 - It would be great to have a cancer center or something like that, but we don't have the infrastructure, funding, or workforce for something like that.
 - Dental or eye care center, so seniors don't have to travel for those services.
5. What would make your community a healthier place to live?
 - I can't think of anything. We are pretty blessed here.

Key Informant Interview #2

Date: 2/25/26

Anonymous

Via phone

1. How do you feel about the general health of your community?
 - Honestly, not great. I think there is an awful lot of obesity, diabetes, and addiction (alcohol).
2. What are your views/opinions about these local services:
 - Hospital/clinic
 - I think access is a problem. We have one PA and one NP. They rotate. Neither is local. They work for two weeks on, then two weeks off. It's not accessible. They are not around. That is not great when you need something followed up. There is something to be said about continuity of care.
 - I'm not sure if it's the individuals or if it's the organizational setup.
 - We don't have the staff to handle things. We have a workforce shortage in our area.
 - I could give you a list of excellent people, but I could do the same for those I wouldn't want to care for my loved one.
 - EMS Services (ER/Ambulance)
 - Thankfully, I haven't needed those, so I can't speak from experience.
 - I think it's better?
 - Public/County Health Department
 - This past winter, there was an older person in town who needed someone to step up and help. County health was contacted regarding this person, and they tried to get the help the individual needed. But it never happened.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - My mother was in the nursing home for 3+ years. I was pleased with her care and what I saw in there. I did find the local nurses and aids to be more compassionate than the traveling staff.
 - The CEO of the nursing home is great. Compassionate and it shows.

- Senior center takes people to appointments or shopping. Sometimes all the way to Billings, which is 250 miles away.
 - Services for Young Adults/Families
 - I don't know much about this.
 - Services for Low-Income Individuals
 - I don't have much information about this. I know low-income folks qualify for assistance.
3. What do you think are the most important local healthcare issues?
- The clinic and ED are huge to have available. We have no pharmacy. It's 50 miles to a pharmacy. We now have an assisted living facility available. No dentist, no eye doctor, no hearing doctor. Anything above basic medical services is not available here.
4. What other healthcare services are needed in the community?
- Scans would be great. We do have X-rays.
 - Telemedicine (it was going on in the past, I don't know if it is anymore).
 - Having specialists come here, like a diabetes specialist, gastroenterologist etc. would be great. It is a long way for people to go when they have to travel out of Circle for services.
5. What would make your community a healthier place to live?
- Access to some specialists- locally. Telehealth if that's all they can do.
 - We had one RN who worked at our clinic for a while. She left and started her own business doing IVs and things. I think it's a great asset to our community. It would be great to get services like that locally. There just isn't a lot here.

Key Informant Interview #3

Date: 3/11/26

Anonymous

Via phone

1. How do you feel about the general health of your community?
- I generally feel good about the health of our community.
2. What are your views/opinions about these local services:
- Hospital/clinic
 - The hospital current hospital is better than it was previously. Three providers have been contracted. The Hospital has availability for appointments, but if the situation is life-threatening it has to move forward to a bigger hospital.
 - There is a good staff of providers. It would be nice to have more local resident providers as opposed to travelling providers. At one point that seemed to be a goal, but I don't know if that's in the works anymore.

EMS Services (ER/Ambulance)

- The EMS services rely on an all-volunteer department. It could be nice to have more volunteers. As the population grows older, there seems to be less individuals willing to take on that service.
- EMS could use new equipment. They are usually successful in fundraising for whatever they need (new ambulance, gurney). But raising the money for new equipment takes a long time
- Public/County Health Department
 - Don't know a whole lot about them. I know they do some regular disaster training, flu clinic/shots. Beyond that not familiar with outreach in community or their services
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - We have nursing home in Circle that is currently at full capacity or appears to be. There is a waiting list for those wanting to live there.
 - We also have an assisted living home in Circle.
 - Circle has a senior center that provides meal and other services. They bring in people to service elderly the community. They bring people in who deal with rehabilitation and some low income services.
 - Could use more money for nursing home updates. Senior center has lots of expenses for that facility. Not sure where money comes from (tax?), but could always stand to be increased to maintain the services they provide for community.
- Services for Young Adults/Families
 - Don't know of anything specific. Young individuals moving into the area aren't new people, but rather people who had moved away at one point or another. Not a lot of new people from the general area from outside of eastern Montana. The services of the area often don't meet expectations of having say a local Walmart or Starbucks, so people should come in with low expectations for service.
- Services for Low-Income Individuals
 - Kind of stated already. There are services available but it depends on if people choose to utilize them. The seniors center doubles as food pantry and place to find info about low income housing, energy requirements, and financing options.

3. What do you think are the most important local healthcare issues?

- There is a high cost for qualified personnel. It depends if we will have enough people using the service to determine if we can maintain it.
- We can't do a lot of tests. We don't have the capability to offer services like CT Scans to people are often referred to larger facilities like Miles City or Billings. A lot of the people who require those services have greater healthcare needs than what can be handled by the local physician.

- The cost is high to offer providers salaries and good benefits. I work on the local health center board and I see the cost to gain and maintain providers, and that cost only seems to go up.
4. What other healthcare services are needed in the community?
- It would be nice if we had someone local for pediatric care. We have been working on those kinds of trainings, but no one is there specifically for pediatrics. Lots of people travel out of the area for those types of services for their kids/pregnancy. It'd be nice to offer locally but you also have to realize how much work is available for that specialization here.
5. What would make your community a healthier place to live?
- Less cancer.
 - There are other ways than hospitals to maintain a person's health. Some people are actively involved in community in schools and businesses. As far as medical, we do what we can locally until it must be sent out.
 - We could use more outreach to know what services are available locally. This would help so people know when there is a service they could access here as opposed to outsourcing. You'll always have people willing to travel out if they think they need to.

Appendix J – Request for Comments

Written comments on this 2026 Community Health Needs Assessment (CHNA) Report can be submitted to McCone County Health Center at:

McCone County Health Center
Administration
PO Box 48
605 Sullivan Avenue
Circle, MT 59215

Please contact MCHC's CEO Jacque Gardner (jgardner@mcconehealth.org), Director of Nursing (DON) Candy Huseby (chuseby@mcconehealth.org), or Office Manager Bridget Loudon (bloudon@mcconehealth.org) at 406-485-3381 or email with questions.

